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ABSTRACT

This annotated bibliography lists books, papers, reports, and articles of interest to integrated service providers and higher education interprofessional programs providing health, educational, and social services for at-risk children, youth, and their families. The material is divided into six parts: in the first part, 19 entries describe interprofessional preservice education courses at the college/university level and inservice training programs for practicing professionals; additionally, there are 20 reports and articles that explore some of the assumptions and techniques of teaching interdisciplinary classes. Part 2 lists 14 documents of interest to academic departments considering distance education and distance learning programs. Part 3 contains 21 articles and reports on interprofessional education and practices, plus 19 additional articles on accountability, linkages, and confidentiality. Thirteen entries in Part 4 describe, model, or evaluate actual integrated services programs, and include research papers and survey results. Part 5 lists 4 resource directories and bibliographies; and Part 6 contains some broad-based general interest material, which may be of interest in an academic setting, including 6 books, 4 journal articles, and 6 reports, plus a videotape on collaboration. (CH)

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INTERPROFESSIONAL EDUCATION AND TRAINING INTEGRATED SERVICES CONCERNS

AN ANNOTATED BIBLIOGRAPHY

Volume II

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November 1996

Supported in part by project MCJ-415093 from Maternal and Child Health Bureau (Title V, Social Security Act), Health Resources and Services Administration, Department of Health and Human Services. The grant is titled, *Higher Education Curricula for Integrated Services Providers.*

Teaching Research Division
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PREFACE

The fragmentation of the human services delivery system is a serious social problem. At risk children, youth, and their families are frequently served by a variety of health, educational, and social service agencies with little or no coordination occurring among them. Frequently, there are overlaps of services, duplications of efforts, and large gaps in needed assistance.

The same condition is also true of some university training programs. There is minimal contact among the various academic departments on campus or between the on-campus learning in the academic departments and the experiences professionals will face in the community as they begin their practice.

In order to improve collaborative, community-based integrated services, a four-year grant from the Maternal and Child Health Bureau's Division for Children with Special Health Care Needs, titled Higher Education Curricula for Integrated Services Providers, was awarded to Teaching Research Division of Western Oregon State College in June 1994. This grant will assist colleges and universities as well as professionals already in the field to develop models of interprofessional training and to increase the knowledge and skills that will assist them to effect locally integrated services.

In order to accomplish this goal, one of the project activities is to collect and disseminate information regarding integrated services efforts and higher education interprofessional education programs through an annotated bibliography. This document is the second of three bibliographies.

The first bibliography, Higher Education Curricula for Integrated Services Providers, Annotated Bibliography, was published in September 1995. It is available through ERIC, ED 391 438, and through the Internet, http://tr.wosc.osshe.edu.

This document titled, Interprofessional Education and Training, Integrated Services Concerns, An Annotated Bibliography, includes books, papers, reports and articles from literature data bases such as ERIC and PsychLit. Citations include educational and training programs, some suggestions in use of multimedia instruction, issues in interprofessional education, some descriptions of integrated programs, additional directories and a short list of interesting publications that may prove useful in an academic setting.

Many of the entries contain additional references and lists of resources. This document is available through Teaching Research Division, Western Oregon State College, 345 N. Monmouth Avenue, Monmouth OR 97361, or by calling (503) 838-8974.

This document is organized in the following sections with a brief description of content at the beginning of each section:

*Interprofessional preservice education and inservice training programs

*Distance education/Distance learning

*Interprofessional issues of integrated services

*Descriptions, models, and evaluations of integrated services programs

*Resource directories and bibliographies

*Publications of interest

The information included in this publication will be of interest to students, practitioners, course instructors, and community members working toward improving coordination and integration of services to children and their families through preservice or inservice education and training. Libraries will find this a useful reference for those researching specific areas of interprofessional education and integrated services.

In the interest of sharing information, readers may photocopy this document "at will" although a citation would be appreciated.

A sincere thanks to our editor, Anne Warren Smith, for all her helpful suggestions

This publication is supported in part by project MCJ-415093 from Maternal and Child Health Bureau (Title V, Social Security Act), Health Resources and Services Administration, Department of Health and Human Services. The grant is titled, *Higher Education Curricula for Integrated Services Providers.*

Dr. Vic Baldwin, Director of the Teaching Research Division of Western Oregon State College, is the project director.

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Project Coordinator

INTERPROFESSIONAL EDUCATION AND TRAINING INTEGRATED SERVICES CONCERNS

AN ANNOTATED BIBLIOGRAPHY

Part I

INTERPROFESSIONAL PRESERVICE EDUCATION AND INSERVICE TRAINING PROGRAMS

Section A contains descriptions of interprofessional preservice education courses at the college/university level and inservice training programs for practicing professionals.

Section B entries explore some of the assumptions, dynamics, and techniques of teaching interprofessional/interdisciplinary classes through a variety of reports and articles.

A number of the citations in sections A and B appeared in the first annotated bibliography published through this grant. But, because of their emphasis on education and training, the citations are being included in the list below in order to present a more complete examination of the topic.

Section A

Beninghof, A., & Singer, A. (1992, Winter). Transdisciplinary teaming: An inservice training activity. Teaching Exceptional Children, 24(2), 58-61. (ERIC Document Reproduction Service No. EJ 439 594)

> Described is a training activity to introduce special educators to the transdisciplinary teaming model in comparison with the multidisciplinary and interdisciplinary models. The group activity highlights critical components of each model It has been used with more than 100 special education team members in Connecticut to introduce transdisciplinary teaming. (DB)

Berry, J. O. (1992, January). Preparing college students to work with children and families with special needs. Family Relations, 41, 44-48.

This article describes an interdisciplinary college course designed to prepare students in psychology and related areas to work with children and families with special needs. Techniques are presented for meeting the goals of enhancing knowledge about developmental disabilities and chronic illnesses in childhood, including the scope of the problem and legal rights, increasing sensitivity to the impact of negative attitudes on this population, and utilizing a family systems approach. (author)

Eaton, A.P., Coury, D. L., & Kern, R. A. (1989). The roles of professionals and institutions. In R. E. K. Stein (Ed.), Caring for children with chronic illness, Issues and strategies (pp. 75-86). New York: Springer.

"The focus of this chapter is what we need from institutions and professionals to improve the delivery of health care for children and adolescents with chronic conditions" (p. 85). Emphasis on high quality, comprehensive health care that is coordinated and family centered is discussed as well as the need for participation in interdisciplinary teams and intimate familiarity with community and governmental resources. A model curriculum covering the areas of behavioral issues, developmental issues, health legislation and policy, health planning, psychosocial aspects of chronic conditions, and the development of research and teaching skills is included. The chapter concludes that training approaches must be evaluated in order to define the best ones. (jas)

Gallmeier, T. M., & Bonner, B. L. (1992). University-based interdisciplinary training in child abuse and neglect. Child Abuse and Neglect, 16, 513-521.

This article presents an overview of the 10 university-based interdisciplinary training programs in child maltreatment funded in 1987 by the National Center on Child Abuse and Neglect. The organizational structure, student composition, and academic requirements of the program are described. A more detailed description of one of the programs based in a medical school is presented as a model for replication. The specific clinical and didactic components of the program's curriculum are included. Additionally, recommendations for replicating an interdisciplinary graduate training program in child abuse and neglect are discussed. (author)

Garland, C. W., Kniest, B. A., & Gallagher, F. (December 1994). Caring for Infants and toddlers with disabilities. New roles for physicians (Final Report). Lightfoot, VA: Child Development Resource, Inc. (ERIC Document Reproduction Service No. ED 379 881)

The "Caring for Infants and Toddlers with Disabilities: New Roles for Physicians" program was designed to ensure that pediatricians and family physicians have the information and skill needed to participate fully in a Virginia statewide system of early intervention. An inservice training model was developed and field tested with approximately 200 physicians. The training curriculum included four levels: (a) introductory seminar; (b) self-study and technical support; (c) clinical application; and (d) communication and follow up. The curriculum focused on the role of the primary care physician on a community-based team engaged in a Child Find program, developmental evaluation and assessment, Individualized Family Service Plans, and transition. Using a "train-the-trainer" approach, a group of physicians was trained to teach the Introductory Seminar level as part of interdisciplinary teams composed of project staff, physicians, other early intervention providers, and parents. The remainder of the training was designed to be self-directed to the maximum extent possible, using self-study manuals and accompanying audiotapes as a major portion of the curriculum. Project products included a manual, four audiotapes, and evaluation measures. Program evaluation data support the efficacy of the model in increasing physicians' knowledge and competency as members of early intervention teams. Appendices include a sample seminar agenda, a listing of competencies, the self-study manual and evaluation instruments. (DB & aws)

Jesien, G., Rosin, P., Tuchman, L., & Whitehead, A. (1992). The Wisconsin Family-Centered Inservice Project. Inservice training programs for related services (Final Report). Madison: University of Wisconsin. (ERIC Document Reproduction Service No. ED 366 136)

This final report of the Wisconsin Family-Centered Inservice Project describes the development, testing, implementation, and evaluation of an interdisciplinary inservice course for early interventionists and parents. The inservice course focused on attitudes, knowledge, and skills in four principal topic areas: (a) family-centered, (b) interdisciplinary and interagency teaming, (c) service coordination, and (d) problem solving. Innovative aspects included participant's self-assessment of perceived competency level in content areas, participant selection of goals and activities relevant to the individual's life or job situation, development of an individualized learning plan based on the self-assessment, and use of interdisciplinary team teaching including parents of children with special needs as faculty. The semester-long course was field tested at three University of Wisconsin campuses, with adaptations presented in a variety of other settings. Quantitative evaluation revealed that participants exhibited significant changes in skills and knowledge and were highly satisfied with the course. Qualitative evaluation indicated that participants perceived the program as having a high impact on personal, programmatic, and systems levels. Appendices include a draft review of "Partnership in Early Intervention" by Peggy Rosin and others; a self-assessment rating scale and individualized learning plan; and the course rating form. (Containing a bibliography of 53 items) (DB & aws)

Johnson, H. C. (Ed). (1993). Child mental health in the 1990s: Curricula for graduate and undergraduate professional education. Washington DC: U.S. Department of Health and Human Services.

There exists a pressing need "for current, readily accessible, coherent resource materials on child mental health for use in social work foundation and practice courses" (p. iv). Social workers are a major provider of services through clinical mental health facilities, public schools, child protective services, foster care and adoption, financial assistance programs, juvenile justice facilities, hospitals, and recreational programs. This monograph is designed to prepare students for practice with children who have mental, emotional and behavioral problems, and their families. Ideas for learning activities and class work are included along with articles, books and lists of videotapes. Materials are designed so that instructors can review them for teaching ideas that range from one hour to lengthy assignments or the modules can be incorporated into their curricula for enrichment. (jas)

Kaiser, A. P., & McWhorter, C. M. (Eds.). (1990). Preparing personnel to work with persons with severe disabilities. Baltimore: Paul H. Brookes.

Preparing Personnel to Work with Persons with Severe Disabilities outlines critical strategies for making personnel preparation a priority for local, state, and federal funding and programs planning; establishing collaboration as central to effective preparation; and ensuring construction and maintenance of long-term systems for continued training in state-of-the-art practices.

This insightful book describes high quality; best practices in early childhood services, quality community care; educational supports and supported employment; and planning values-based curricula. Preparing Personnel highlights four exemplary personnel preparation models representing current approaches to both preservice and inservice training.

Preparing Personnel will have particular relevance to professionals and graduate students in special education, education policy makers, state level administrators, and local school administrators. (text on book cover)

Kemp, L., & Owens-Sabir, M. (1994). Preparing education practitioners for educating children and youth facing harsh social realities: A shared responsibility. Jackson, MS: Jackson State University. (ERIC Document Reproduction Service No. ED 384 588)

Project TEACH (Teacher Education: Advancement through Collaboration with Human Services) was designed in part to prepare and train teachers to become

knowledgeable about services offered by public agencies and private human and social service agencies by incorporating interprofessional internships into the teacher education curriculum. Five main program components are a preservice area where prospective teachers spend time onsite at the service agencies before graduation; inservice teacher training sessions; clearinghouse network and dissemination; collaboration of schools and families with human and social services agencies; and curriculum modification. The project involves four teams, each with a different function: a training team trains local site teams and conducts seminars and workshops; local site teams train administrators and teachers at their own schools; a curriculum revision team will develop a model teacher education curriculum based on project findings; and a field monitoring team evaluates all project activities. Curriculum content about human services were integrated into the existing teacher education program in the form of several broad human service curriculum themes: mental health, special needs agencies, neuropsychiatric services, psychological services, treatment services, shelter and protection, preventive services, youth guidance services, parenting support services, and youth court agencies. (JB)

Oklahoma State Department of Human Services (1993). Foundation level training, Module one: People are people, Participant's manual. Oklahoma City: Developmental Disabilities Services Division. (ERIC Document Reproduction Service No. ED 374 584)

This participant's manual covers "People are People," the first module of a four-module training program for all individuals employed in programs funded by Oklahoma's Developmental Disabilities Services Division. This includes van drivers, recreation workers, residential staff, administrators, case managers, secretarial/clerical staff, vocational staff, advocates, physicians, psychologists, and others. The primary objectives of the module is to have the participant understand and apply the concept of looking at individuals with developmental disabilities as people rather than as products of their disability. Secondary objectives include defining and using "People First" language, identifying criteria involved in the term "developmental disability," describing common developmental disabilities, and listing three statistics concerning people with developmental disabilities. The module includes the primary and secondary objectives, a text and question format that allows participants to become actively involved in the learning process, information from transparencies used in training, and copies of handouts (JDD)

Oklahoma State Department of Human Services (1993). Foundation level training, Module two: Changing times, Participant's manual. Oklahoma City: Developmental Disabilities Services Division. (ERIC Document Reproduction Service No. ED 374 585)

This participant's manual covers "Changing Times," the second module of a four-module training program for all individuals employed in programs funded by Oklahoma's

Developmental Disabilities Services Division. This includes van drivers, recreation workers, residential staff, administrators, case managers, secretarial/clerical staff, vocational staff, advocates, physicians, psychologists, and others. The primary objective of the module is to have the participant understand and apply the principles of normalization to the concepts of rights and values of people with developmental disabilities. Secondary objectives focus on perceptions of individuals with developmental disabilities through various periods of history, congregate settings, legislative rights and other rights, types of abuse and neglect, values of individuals with developmental disabilities, the importance of the principle of normalization for improving public images for people with developmental disabilities as well as promoting their social integration within the community, and methods of recognizing and eliminating barriers to normalization. The module includes the primary and secondary objectives, a text and question format that allows participants to become actively involved in the learning process, information from transparencies used in training, and copies of handouts. (JDD)

Oklahoma State Department of Human Services (1993). Foundation level training. Module three: Systems and policies. Participant's manual. Oklahoma City: Developmental Disabilities Services Division. (ERIC Document Reproduction Service No. ED 374 586)

This participant's manual covers "Systems and Policies," the third module of a four-module training program for all individuals employed in programs funded by Oklahoma's Developmental Disabilities Services Division. This includes van drivers, recreation workers, residential staff, administrators, case managers, secretarial/clerical staff, vocational staff, advocates, physicians, psychologists, and others. The primary objective of the module is to have the participant understand the system that shapes service delivery in Oklahoma for people with developmental disabilities. Secondary objectives focus on specific services provided and people responsible for delivering those services, basic services provided by state employees and private provider agencies, members of interdisciplinary teams, elements of successful habilitation programs, and the process an interdisciplinary team goes through in developing an individual plan. The module includes the primary and secondary objectives, a text and question format that allows participants to become actively involved in the learning process, information from transparencies used in training, and copies of handouts. (JDD)

Oklahoma State Department of Human Services (1993). Foundation level training. Module four: The new frontiers. Participant's manual. Oklahoma City: Developmental Disabilities Services Division. (ERIC Document Reproduction Service No. ED 374 587)

This participant's manual covers the fourth module of a four-module training program for all individuals employed in programs funded by Oklahoma's Developmental Disabilities Services Division. This includes van drivers, recreation workers, residential

staff, administrators, case managers, secretarial/clerical staff, vocational staff, advocates, physicians, psychologists, and others. The primary objective of the module is to have the participant understand future trends, both technological and environmental, influencing the delivery of services to individuals with developmental disabilities. Secondary objectives include discussing influences on the policies of the State of Oklahoma in the provision of services to individuals with developmental disabilities, listing areas in which the power of self-advocacy is important, describing the role of the State in relation to supporting families, and listing technological advances that aid individuals with disabilities in achieving greater independence. The module includes the primary and secondary objectives, a text and question format that allows participants to become actively involved in the learning process, information from transparencies used in training, and copies of handouts. (JDD)

Ronnau, J., & Page, M. (1991). Training manual for family advocacy services. Lawrence. University of Kansas, School of Social Welfare.

This resource manual is designed for training and on-going reference by family case managers or family advocates who work to meet the needs of families who care for young children with emotional or behavioral problems. Initial training of family case managers includes using all the sections of the manual. Later, after training is complete, specific sections of the manual can be accessed for quick reference. (jas)

Russell, W. R. (1994). Preparing collaborative leaders: A facilitator's guide. Resources and materials. Washington, DC: Institute for Educational Leadership. (ERIC Document Reproduction Service No. ED 379 756)

This facilitator's guide offers tools for training leaders to solve problems in new and collaborative ways. It distinguishes between having knowledge about a subject and being able to use that knowledge effectively. The guide offers 15 units designed to meet the following objectives: (a) draw on each participant's work experience; (b) engage learners through a variety of training approaches; (c) build on group process and team-development skills; and (d) use current research and resources on collaboration and leadership. Part I outlines the first four meetings of a 12-month program. Its goals are becoming acquainted with the program, team members, and collaboration basics; establishing learning goals; and planning a community needs and resource map. Part 2 emphasizes the twin targets of the program--leadership training and collaborative skills. connecting with people, envisioning change, conducting a leadership retreat, managing conflict, building cross-cultural awareness, building teams, leading change, understanding power and politics, and examining organizational cultures. The third part shows participants how to use their newly acquired skills and apply them in a collaborative initiative. It targets the "nuts and bolts" of building and maintaining a collaborative effort,

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such as planning for program implementation, financing collaborative, and selling change. (Contains 177 references) (LMI & aws)

Sia, C. J., & Peter, M. (1989). The pediatrician and the new morbidity: A CME training program for the practicing physician. Honolulu, HI: The Physician Involvement Project of the Hawaii Medical Association.

"The Pediatrician and the New Morbidity" is a unique CME (Continuing Medical Education) course designed to "provide broad constructs that can be applied to primary care pediatricians to assure family centered, community based, coordinated care for children with special needs and their families" (p ii). The training, comprised of three modules involving 2 hours of training each and covering a different aspect of optimal care, has been field tested by the SPRANS Physician Involvement Project with primary care physicians in Hawaii. Modules include the following. The first module, "The Pediatrician and Community Based Care," identifies the new morbidity facing pediatricians and the new role they will need to play. The second module, titled "The Pediatrician and Coordinated Care," is concerned with the pediatrician's role in coordinated care and contains checklists, referral resources, and protocols. The third module, "The Pediatrician and Family Centered Care," is an introduction to family-centered care. The module highlights issues of early diagnosis and breaking diagnostic news. (jas)

Winitzky, N., Sheridan, S., Crow, N., Welch, M., & Kennedy, C. (1995). Interdisciplinary collaboration: Variations on a theme. Journal of Teacher Education, 46(2), 109-119.

This article describes the initiatives in the Graduate School of Education at the University of Utah to develop collaborative preparation programs for educators focused on the needs of children and youth. Three variations on this theme, a graduate course on interdisciplinary teaming, a site-based transdisciplinary educational partnership project, and the formation of the Utah Network Project to develop, implement and evaluate new approaches to collaboration among schools, are described, discussed, and evaluated. Conclusions state that (a) reform is complicated and takes time, (b) modeling must be done for students to demonstrate the capabilities we want them to develop, (c) we must alter past commitments in order to forge new ones, and (d) the issue of interprofessional development schools needs to be addressed. (jas)

Winton, P. J. (1992). Working with families in early intervention: An interdisciplinary preservice curriculum (2nd ed.). Chapel Hill: University of North Carolina Frank Porter Graham Child Development Center.

This manual, an interdisciplinary preservice curriculum for working with families in early intervention, is divided into five sections. Section I, "Background and Overview,"

discusses the development of the curriculum. Section II, "Course Syllabus and Modules," contains student objectives, suggested readings, and suggested student activities. Section III includes both a student and course evaluation. Section IV has a bibliography and section V contains the appendices. The intent of the manual is to provide a framework for teaching a semester-long course on families. There are 11 three-hour teaching modules The author encourages users to expand and modify the curriculum in ways that will work best for them and their students. (jas)

Zuniga-Hill, C., & George, J. B. (1995). Developing integrated services for children and families: A cross-disciplinary approach. Journal of Teacher Education, 46 (2), 101-108.

Developing a means of collaboration between community service institutions and schools in service to at risk children, youth, and their families is the central theme of this paper. The potential role of professional development schools and one example of preservice preparation, a program within the California State University system, are examined. Current curriculum revisions, students and faculty as participants, the focus of the seminars, and the teaching methodology are discussed. Student and faculty reaction to the preservice training is outlined and a summary of the seminar experience included. It is concluded that, in order to bring about collaboration, changes are required in preservice and inservice education as well as in actual practice. (jas)

Section B

Casto, R. M. (1987). Preservice courses for interprofessional practice. Theory into Practice: Interprofessional Education, 26(2), 103-109.

The principles central to a program of interprofessional education at the preservice level are discussed in this article. These principles include courses that cover a wide range of social and professional problems, a faculty team approach, opportunities for graduate students and practicing professionals to take courses together, maintenance of a mix of professions, and use of a case study approach. The author describes courses being offered by The Ohio State University Commission on Interprofessional Education and Practice. Included in the article are course objectives and content and teaching methodologies. (jas)

Casto, R. M. (1993). Defining, supporting and maintaining interprofessional education. Journal of Education Policy, 8(5-6), 153-155.(ERIC Document Reproduction Service No. EJ 475 840)

The Interprofessional Commission of Ohio is a partnership of eight state professional associations, six professional schools and colleges at Ohio State University, and three theological schools. Focus is on ethical issues common to the helping professions, changing societal values and the professions, and training in intercollaborative skills. The commission is compared with a faculty-driven University of Washington program. (MLH)

Cioffari, A. T., Buchard, J. D., Carling, P. J., & Copeland, R. E. (1993). Creating a competent workforce in Vermont: Promoting public-academic linkages and human resource development. In P. Wohlford, H. F. Myers, & J. E. Callan (Eds.), Serving the seriously mentally ill: Public-academic linkages in services, research, and training (pp.157-163). Washington, DC: American Psychological Association.

Although centered on the specifics of the mental health workforce in Vermont rather then integrated services as a whole, this chapter addresses the history of public-academic linkages including training and internships; some current changes in the mental health system including the use of task forces and work groups; and possibilities for future changes using planning groups. Five recommendations for training from the work groups are listed: (a) training should be multidisciplinary, (b) all training, preservice, and inservice should involve consumers, ex-patients, and families, (c) the collaborative service delivery model should be used, (d) curricula should include good, basic information and be grounded in community integration, and (e) in both inservice and in preservice and academic training, attention needs to be paid to making programs accessible to consumers, ex-patients, and family members. Suggestions for a core set of trainings that should occur

on an annual basis include standardized curricula, ongoing management training, and four to six annual events that cover emerging issues and allowance for staff recognition. Linkages between standardized training and academic credit are also explored. (jas)

Cohen, E., & Ooms, T. (1993). Training and technical assistance to support family-centered, integrated services reform. Washington, DC: The AAMFT Research and Education Foundation. (ERIC Document Reproduction Service No. ED 360 595)

This document begins by presenting highlights of a seminar held in June of 1993 to describe innovative training programs that focus on interprofessional and family-centered forms of service delivery in the public sector and to discuss some of the issues, barriers, and challenges. Following these highlights is a background briefing report on training and technical assistance to support family-centered, integrated services reform. In the first section of this briefing report, current trends, selected activities, and issues and questions in four major areas are discussed. The four areas include professional university-based training; inservice, on-the-job training; training for new careers; and technical assistance Each section draws upon and briefly describes the related activities of a number of current initiatives that promise to have a sustained impact. Identifying information about the organizations sponsoring these initiatives is listed in the back of the report. Nine ambitious inservice training efforts, statewide in scope, are described, these nine training efforts are an integral part of ongoing reform efforts and several of them are linked with federal program reforms. Some recent trends in federal training programs are reviewed and suggestions are made for a number of ways in which the federal government could play a constructive leadership role in enhancing these new directions in training the human service workforce. The report ends with a list of 54 organizational resources and approximately 70 key references. (NB)

Corrigan, D., & Udas, K. (1996). Creating collaborative, child and family centered, education, health, and human services systems. In J. Sikula, T. Buttery, & E. Guyton, (Eds). The handbook of research on teacher education: A project of the Association of Teacher Educators (2nd ed.) (pp. 893-921). New York: Macmillan.

The concept of integrated education, health, and human services systems and the interprofessional development and research programs to support such integrated systems is an idea whose time has come--again. This chapter details the threats to America's children, reviews the policies undergirding new proposals for changing the status quo, and reports on integrated services programs currently in operation and the design and development of interprofessional education programs to support them. Particular implications are drawn for the role that research and development must play in creating collaborative, child and family centered, education, health, and human services systems. (jas)

Cyphert, F., & Cunningham, L. L. (1987). Interprofessional education and practice: A future agenda. Theory into Practice: Interprofessional Education 26(2), 153-156.

This article seeks to accomplish two goals. The first is to present several generalizations regarding the status of interprofessional education and practice such as the recognition of the need for society to communicate, cooperate, and coordinate efforts made to service clients, the need to build diversified models of interprofessional teams, the need for basic research in areas such as ethics, contributions interprofessional education makes to the practice itself, and alternative modes of interprofessional practice and changes in curricula. The second goal is to analyze how one can become involved in interprofessional practice through interprofessional education. The author concludes that circumstances that surround our individual lives are not likely to become less complex, and thus the challenge is to locate ways human services professionals can share their competencies through collaboration. (jas)

Downes, P., & Newell, W H. (1994) Overcoming disciplinary boundaries. Liberal Education, 80(1), 24-26.

This piece, although not based on integrated services, outlines the dynamics of an interdisciplinary seminar consisting of professors and students from psychology, mechanical engineering, physics, music, theology, business management, and English as they addressed the question of "How Much Control Do We Have Over Our Minds and Lives?" Some of the issues raised were the need for cooperation among team members, the relinquishing of control, lessons about interdisciplinary investigation, and how to create and implement a course of interdisciplinary study. (jas)

Fenichel, E. S., & Eggbeer, L. (1990). Preparing practitioners to work with infants, toddlers and their families: Issues and recommendations for policymakers. Arlington, VA: National Center for Clinical Infant Programs, Training Approaches for Skills and Knowledge Project.

This report discusses issues and makes recommendations to policymakers on the preparation of practitioners to work with infants, toddlers, and their families. It provides examples of promising approaches for enhancing competence through training in preservice, inservice, and continuing education. A set of four elements of training is identified and the authors suggest 10 priority areas for action for collaboration among policymakers, parents, educators, and professionals to improve training. (jas)

Friesen, B., & Schultze, K. (1992, August). Parent-professional collaboration content in professional education programs: A research report. Portland, OR: Portland State University, Regional Research Institute for Human Services.

This research paper is the result of materials gathered through a study on professional training curricula in schools of social work, psychiatric nursing, clinical psychology, special education, and child psychiatry throughout the United States. The purpose of the study was to locate innovative course curricula and other materials designed to promote parent-professional partnerships on behalf of children with disabilities, and specifically on behalf of children who have serious emotional disorders The report is divided into sections by profession and contains descriptions of programs, individual courses, and published materials by the author. The appendix lists all who responded to the survey. (jas)

Garland, C. W., & Buck, D., M. (1990). Project Trans/Team inservice training project Final report. Lightfoot, VA: Williamsburg Area Child Development Resources. (ERIC Document Reproduction Service No. ED 344 366)

This final report describes Project Trans/Team, a three-year inservice training project designed to provide training and technical assistance to programs that serve children from birth to three years of age who have disabilities, are developmentally delayed, or are at risk. The project provided training to 20 programs and 282 professionals in six states: Texas, New Hampshire, Virginia, Maryland, New Mexico, and New York. In each state the project worked in coordination with the state lead agency to identify local sites and related administrative and service issues. Training and technical assistance was based on individualized program development and staff development needs The Project Trans/Team Program Profile Need Assessment was developed to identify program and staff needs. The project developed and field tested several training units which address the transdisciplinary team approach to early intervention, family systems, transition, interagency collaboration, team building, and case management. Follow-up data showed inservice training by the project resulted in significant plans for program change in 85% of programs trained. Most frequently mentioned areas of program change were team functioning and family focus. Five appendices include sample pages of a training unit, program details, the needs assessment instrument, and a sample training agenda. (DB & aws)

Harbaugh, G. H., Casto, R. M., & Burgess-Ellison, J. A. (1987). Becoming a professional. How interprofessional training helps. Theory into Practice: Interprofessional Education, 26,(2), 141-145.

This paper is the result of a study involving 196 students and professionals from

eight disciplines who took the Meyers-Briggs Type Indicator Test and completed an extensive questionnaire based on Harbaugh's (W)holistic Scales. The purpose was to determine whether or not students with certain personal characteristics were more likely to accept an invitation to enroll in an interprofessional course. Issues addressed included identification of (a) the traits that attract students into interprofessional education, (b) the ability of the student to make the transition from interprofessional training into employment, (c) how new professionals demonstrate their approach to clients, their development as a professional, and their degree of personal satisfaction in their work, and finally, (d) the shape of the future with interprofessionally trained professionals. The author concludes that certain types of persons seem to be especially attracted to interprofessional courses. (jas)

Houle, C.O., Cyphert, F., & Boggs, D. (1987). Education for the professions. Theory into Practice: Interprofessional Education, 26(2), 87-93.

What constitutes professional education and how competencies are acquired; the significance of continuing professional education; and the similarities and differences between interprofessional education and practice and education and practice in singular professions are explored in this paper. Interprofessional education is defined. (jas)

Jacobs, L., (1987). Interprofessional clinical education and practice. Theory into Practice: Interprofessional Education, 26(2), 116-123.

"In the area of professional education and practice, some degree of clinical experience is universally deemed desirable for training a student in the helping professions Field work, apprenticeship, intern placement, and other clinical experiences provide a dimension to the professional's education that reading materials and classroom simulations do not" (p. 116). This paper discusses the various aspects of such training including four points of difference between the seminar and the conference models of interprofessional education as compared to the clinical model; the aspects of a pure clinical education model and the difficulty in actually constructing it; the degree of authority available to the students in a clinic situation; the knowledge and skill needed to be developed to function as a team; the determination of the best interests of the clients in a training clinic; and an understanding, appreciation, and respect for the professionals making up the interprofessional clinic. (jas)

Jivanjee, P. R., Moore, K. R., Schultze, K. H., & Friesen, B. J. (1995). Interprofessional education for family-centered services: A survey of interprofessional/ interdisciplinary training programs. Portland: Portland State University, Research and Training Center on Family Support and Children's Mental Health. (ERIC Document Reproduction Service No. ED 385 068)

This study identified the content and educational methods of family-centered training programs designed to prepare professionals for interprofessional, interagency and family-professional collaboration. Although the main focus was on training to improve services to families whose children have serious emotional disorders, the programs identified were drawn from the broad arena of training for family-centered practice in the human services. Fifty-one programs were studied in two major groups: university preservice and professional education programs (n=25), and agency-based inservice and continuing education programs (n=26). An overview is presented of the training programs, including information about the design, planning, implementation, content, administration, and evaluation of training programs. Approximately three-fourths of the training programs surveyed had an interdisciplinary advisory group. This appears to be an important tool in developing and maintaining a collaborative focus. Findings suggest that interprofessional collaboration is seen as a special interest, rather than an essential part of the training for all professionals to provide family-centered services. A brief case study of each training program is included. Appended is a list of name, addresses, and the telephone numbers for each program and brief program descriptions. (SW)

Knapp, M. S., Barnard, K., Brandon, R. N., Gehrke, N. J., Smith, A. J., & Teather, E. C. (1993). University-based preparation for collaborative interprofessional practice. Journal of Education Policy, 8(5-6), 137-151. (ERIC Document Reproduction Service No. EJ 475 849)

Universities must devise and sustain preparation programs that will instill the skills, knowledge, and attitudes needed to guide intercollaborative work. Challenges arise in four overlapping arenas: the external environment (including key accrediting and credentialing bodies), the intellectual core of the professional disciples, faculty involvement in curriculum development, and onsite "practicum" learning experiences. (MLH)

McCall, R. B. (1990). Promoting interdisciplinary and faculty-service-provider relations. American Psychologist, 45(12), 1319-1324.

Some principles of promoting interdisciplinary education and research within a university and of facilitating mutually beneficial and productive relations between university faculty and community human service providers are presented. They are illustrated with examples from the operation of the University of Pittsburgh Office of Child Development, which serves these goals in more than 700 families and 585 community agencies concerned with children, youth, and families. (author)

Robinson, B., & Schaible, R.M. (1995). Collaborative teaching. College Teaching, 43(2), 57-59.

This article provides some guidelines and "practical suggestions on how to prepare for and carry out collaborative teaching successfully" (p. 57). Twelve specific suggestions are offered for teachers preparing to team teach a course. Included are addressing the interpersonal relationships between the teachers such as teaching style; the choosing of course materials, establishing the criteria for grading, and handling student responses to collaborative teaching. The article concludes with a discussion on the benefits to teachers and students of collaborative learning in an interdisciplinary course of study. (jas)

Roth, M., & Miller, S. (1991, Fall). Transdisciplinary teaming in preservice special and adapted physical education: Practicing what we preach. Teacher Education and Special Education, 14(4), 243-47. (ERIC Document Reproduction Service No. EJ 445 782)

This study examined transdisciplinary teaming as a means to enhance integrated related service instruction for individuals with disabilities. Results of a survey of 12 preservice students studying special education or adapted physical education indicated that their perceptions and comfort in working across disciplines were more positive after viewing the processes modeled by university faculty. (DB)

Scott, S., with Perlowski, K. (1994). Moving from art to craft: Conversations with technical assistance providers on building capacity to assist comprehensive, cross-system reforms. Washington, DC: The National Center for Service Integration and the Institute for Educational Leadership.

This monograph, based on telephone interviews with professionals from backgrounds including law, human service delivery, formal education, mediation and dispute resolution, and child and family advocacy, was written to help define effective practices for those extending training in technical assistance and facilitative leadership to communities and state systems for delivering family services. In order to better prepare professionals to work together, the authors suggest a practical approach to the training. A "mock facilitative leader job description" was developed. (jas)

Tellez, K., & Schick, J. (1993). Critical teacher education and multicultural issues. Journal of Education Policy, 8(5-6), 165-67.(ERIC Document Reproduction Service No. EJ 475 843)

Although University of Washington serves as vanguard for interprofessional collaboration, there are two features of professional practice not addressed in the program. Implementation may be a problem, since teacher training is limited by state and

occurs in contexts distant from urban areas needing interprofessional collaboration. Multicultural considerations figure highly; few calls for integrated social services come from upperclass white neighborhoods. (MLH)

Part II

DISTANCE EDUCATION/DISTANCE LEARNING

The "whys, whats and wherefores" in the use of distance education as a means of teaching graduate courses are only as current as today's date. However, the documents listed below should be of assistance to academic departments that are considering using electronic means for teaching off-campus courses using multimedia techniques.

Ahern, T. C., & Repman. J. (1994). The effects of technology on online education, Journal of Research on Computing in Education, 26(4), 537-546.

As new instruction technologies become more commonplace, new questions are being raised concerning the effectiveness of traditional pedagogical methods and learning environments. Traditionally, distance education was synonymous with correspondence courses. Today, however the designer of online learning programs has a myriad of choices ranging from synchronous to asynchronous delivery systems In addition, research on the effects of distance learning systems has traditionally focused on student outcomes Given the complexities of online education, research into this new domain of instructional delivery should take a variety of forms and seek to answer a wide range of questions. This article illustrates the need for greater complexity in basic research on online education programs by exploring the effects of two different delivery technologies on the nature of interaction. (author & aws)

Blurton, C. (1994). Using the internet for teaching, learning, and research. In C. Halpern and Associates (Eds.), Changing college classroom, New teaching and learning strategies for an increasingly complex world (pp.191-212). San Francisco: Jossey-Bass.

This chapter describes "the Internet, a wide area computer network, and how it can be used to improve and extend the capabilities of professional educators" (p. 191) Three electronic tools for conducting business on the Internet are described: electronic mail including electronic publications, listserv conferences, and e-mail file servers; telnet, and anonymous file transfer protocol. Each tool is discussed, detailing its various uses Barriers to use are also listed including lack of access which includes lack of discipline-specific information for faculty, lack of training, difficulty of use including no agreed-upon set of standards on how to access information and the lack of centralized services, which includes the inability to search the Internet for specifics. The chapter concludes with a look at what the future may hold for the Internet including virtual reality, personalized publications, and uses of multimedia such as audio, full-motion video, single images, computer graphics, and formatted textual materials. The chapter concludes with a list of resources for accessing and using the Internet.(jas)

Eastmond, D.V. (1995). Alone but together. Cresskill, NJ: Hampton Press.

This book on learning on-line expresses the author's view "--that the central meaning of adult learning through on-line study lies in more than descriptions of course structures, on-line characteristics, and relationships between demographic variables. Rather, computer conferencing is experienced individually by real adults, and it touches their lives differently, based on the larger context and personal philosophies from which they approach distance study" (p ix). "This book explores the lives of a group of adult students, their rationale for pursuing an independent study degree at a distance, and their perceptions of computer conferencing" (p 4). Chapters include introducing the on-line conference; a discussion of the characteristics of students taking on-line courses; the perspectives of the computer conference including the context in which the students take their courses, technical issues, course requirements, and the roles played by the student and the instructor; some approaches to take when using electronic learning; the dynamics of on-line relations; and "alone but together" the limitations, a model and implications. (jas)

Gibson, W., & Koenig, M. (1995, Winter). Changes in latitude: Distance learning at the University of Illinois. Illinois Libraries, 77(1), 5-10. (ERIC Document Reproduction Service No. EJ 499 902)

[This article] examines the "Fridays Only" part-time/distance education program of the Graduate School of Library and Information Science at the University of Illinois. [It] provides a history of the program and a composite of a typical day for the "Fridays Only" student [and] discusses strengths and weaknesses from the perspective of the students, faculty, and administration. (AEF)

Harris, J. B. (1994). Telecommunications training by immersion: University courses online. Machine-Mediated Learning, 4(2&3),177-185.(ERIC Document Reproduction Service No. EJ 495 114)

[This article presents a] discussion of telecommunications and distance education [which] focuses on a graduate level course, primarily online, that was designed to help educators become familiar with Internet resources. Topics addressed include computer-mediated communication (CMC); cooperative learning and participant roles, challenges of online interactions; and facilitating online learning. (13 references) (LRW)

Jackman, D. H., & Swan, M. K. (1995, Winter). Distance education instructional model applications. New Horizons in Adult Education, 9 (1), 3-9. (Note: Journal available from listserv@alpha.acast. nova.edu: get horizons vol9n1)

This study was designed to identify instructional models that can be used effectively in distance education over the Interactive Video Network (IVN) system in North Dakota and the instructional models preferred by students on- and off-campus. Role playing, simulation, jurisprudential, memorization, synectics, and inquiry models were found to be effective when adapted to the IVN system and were preferred by graduate students. It is recommended that faculty continue to incorporate these models into the graduate courses offered over the IVN system. Direct instruction was perceived as the least effective instructional model and should be used to a limited extent. (authors)

Maxwell, L., Richter, C., & McCain, T. (1995). Graduate distance education: A review and synthesis of the research literature. Presented at the Annual Conference of the International Communication Association Instructional and Developmental Communication Division, Albuquerque, NM. (ERIC Document Reproduction Service No. ED 387 118)

While researchers have studied the impact of technologies on primary, secondary, and higher education, this study asks, "What are the relationships between types of graduate education and the role of communication technology?" The purpose of this paper is to synthesize the current communication issues for distance education at the post baccalaureate level in order to facilitate decision making by educators and policy makers on this evolving topic. It was found that subject matter is a determining factor in whether a course is offered at a distance and how it is supported by communication techniques. Most graduate-level programs available at a distance are professional rather than research oriented. The critical components of post baccalaureate education include supervision of research, access to a library, and face-to-face interaction with faculty and peers. The most common media chosen to support these functions include video and audio teleconferencing, computer-mediated communication, and text-based materials. Ultimately, the most pressing issues surrounding graduate distance education center around the role of dialogue versus transmission of knowledge. These communications issues are not unique to distance education. However, they appear to be moving to the forefront as technology forces an examination of pedagogical assumptions. (Contains 31 references) (author & aws)

McMahon, T., Gantz, W., & Greenberg, B. S. (1995, Summer). Interactive technology and inter-university team teaching. Journalism and Mass Communication Educator, 50(2), 62-70 (ERIC Document Reproduction Service No. EJ 508 205)

[This article] describes a graduate-level seminar involving professors and students at Indiana University and Michigan State University in a joint distant-education venture. [It] discusses background, evaluation goals, instructional strategies, attitudes toward technology, other attitudes, and confounding features. [It also] offers concluding comments and recommendations. (SR)

Office of Educational Research and Improvement (1994). Demystifying the internet practitioner file. Columbus, OH: ERIC Clearinghouse on Adult, Career, and Vocational Education. (ERIC Document Reproduction Service No. ED 372 195)

This practitioner file is designed to provide information for adult, career, and vocational educators who have little or no experience using the Internet. Discussed first are the history of the Internet's development and its content and scope. Ways of obtaining an Internet connection are described. Next, annotated descriptions of eight sources of basic information about using the Internet are provided. Procedures for accessing the ERIC database on the Internet and for using various listservs of relevance to adult, career, and vocational educators are detailed. Examples of the types of information available on the Office of Educational Research and Improvement's Gopher Server are provided. Presented next are a glossary of terms related to computer networks and an annotated bibliography of nine electronic journals of interest to adult, career, and vocational educators. The following issues of concern to educators are discussed briefly from the standpoint of the Internet: access and equity, education, communication styles, privacy and security, and information overload. The importance of addressing electronic mail correctly is highlighted. (MN)

Sagan, E. L., Johnson, R. W., & Spears, A. (1995). Video and computer technologies for extended-campus programming. Proceedings of Association of Small Computer Users in Education (ASCUE) Summer Conference, 150-156. (ERIC Document Reproduction Service No. ED 387 107)

This paper discusses video and computer technologies for extended-campus programming (courses and programs at off-campus sites). This first section provides an overview of the distance education program at the University of Kentucky (UK) and highlights the improved access to graduate and professional programs, advances in technology, funding, staff, support services, library assistance, electronic mail, and joint doctoral programming. The second section describes UK's compressed video systems and programs: (a) the University of Kentucky Interactive Television Network, a digital video system; (b) the Kentucky TeleLinking Network (KTLN), a consortium of publicly supported universities and community colleges and numerous state and local agencies; (c) the KTLN Star Schools project, which will fund 46 new distance learning classrooms in universities and in over 20 high schools across Kentucky; and (d) the Telemedicine Network, which will improve access to health services for rural residents and practitioners. Development and expansion of the digital telephone infrastructure in Kentucky and initiatives to increase off-campus Internet access are also covered. The third section focuses on distance learning initiatives by Owensboro Community College (Kentucky) and the community Networking Cooperative, which will provide community electronic mail and data services to all citizens of Owensboro by dial-up modem. The fourth section

describes the University Libraries services, and the fifth section discusses small college initiatives. (AEF)

Sherry, A.C., & Burke, W. F. (1995). Applying an interactive evaluation model to interactive television. Proceedings of the 1995 Annual National Convention of the Association for Communications and Technology, 519-532. (ERIC Document Reproduction Service No. ED 383 336)

The effectiveness of an evaluation model for interactive television courses was studied. Inquiry was conducted with distance education graduate students to obtain their authentic voices about a traditional model: Small Group Instructional Diagnosis (SGID), a facilitator-based model. Analysis of students' on-line comments and administrative actions indicated that SGID is effective for these students. Student interaction between the process and facilitator were cited as important in the helpfulness of the process. Items on hindering student interactions with the process were identified by more remote site students than by those on campus. On-site students were more apt to indicate no interactions hindered the process and that no changes were needed. Administrators demonstrated change activity. These results are consistent with the data on SGID and have potential for those evaluating graduate courses of study delivered by two-way audio and video. (authors)

Stammen, R. M. (1995). Using multimedia for distance learning in adult, career and vocational education (Information Series, 362). Columbus, OH: ERIC Clearinghouse on Adult, Career and Vocational Education. (ERIC Document Reproduction Service No. ED 384 828)

This paper explores how educators are using multimedia for distance learning, beginning with definitions of the concepts of multimedia, hypermedia, hypertext, distance education, and distance learning. Three types of telecommunications technologies are described: multimedia with broadcast television, multimedia with interactive video (television), and computer-meditated communication networks. The educational opportunities opened up by the Internet and the emergence of the virtual classroom provide examples of the multiple options available for delivery of distance education. The paper examines some of the problems and issues raised by electronic influences and the technical, structional, and attitudinal barriers raised by resistance to technological developments. Instructional challenges and responsibilities that arise as these new technologies alter conceptions of teaching and learning are addressed. Suggestions for using multimedia with telecommunications technologies are presented. Options for using an overhead optical viewer and descriptions of experiments around the United States provide detailed examples of creative uses of multimedia. Finally, the paper suggests what adult, career, and vocational educators need to know in order to use these technologies for effective instruction. The degree of facilitator skill and knowledge and the time and

resources available all contribute to the effectiveness of distance instruction. Most important perhaps is the imagination required to envision the new ways of expanding human potential that these technological tools afford. (SK)

Wolfram, D. (1994, Summer). Audiographics for distance education: A case study in student attitudes and perceptions. Journal of Education for Library and Information Science, 35(3), 179-186. (ERIC Document Reproduction Service No. EJ 489 796)

This paper presents a discussion about the concept of audiographics to support distance education in library and information science. Both on-campus and off-campus student attitudes and perceptions toward the technology utilized in a library and information science graduate level course on information and communication technology are compared and summarized in a cast study. Off-campus or distance students' perceptions of the technology's effectiveness were more positive than local student, although both groups generally found it to be beneficial as teaching and learning technology. (author)

Yakimovicz, A. D., & Murphy, K. L. (1995, April). Constructivism and collaboration on the internet: Case study of a graduate class experience. Computers & Education, 24(3), 203-209 (ERIC Document Reproduction Service No. EJ 508 645)

[This article] discusses the results of a study of a graduate course that was delivered to adult students at three locations by interactive video conference. The course was supplemented with the computer-mediated communication of two Internet discussion groups that provided a framework for enriched collaborative learning. (AEF & aws)

Part III

INTERPROFESSIONAL ISSUES OF INTEGRATED SERVICES

Collaboration is a major theme in the literature regarding issues in interprofessional education and practices. Section A below contains articles and reports concerning this topic. Accountability, linkages, school-linked integrated services, and confidentiality are also included below as issues of interest under Section B. In addition, many of the papers, journals, and books annotated below have some hands-on ideas for technical assistance.

Section A

Behar, L. B. (1993). Public-academic collaboration in training child mental health professionals. In P. Wohlford, H. F. Myers, & J. E. Callan (Eds.), Serving the seriously mentally ill: Public-academic linkages in services, research, and training (pp.77-83). Washington, DC: American Psychological Association.

> "During the 1980s, there were major changes in children's mental health services....The impetus for these changes...has come from the increased visibility of the needs of children for mental health services, [which led] to major policy changes across federal and state agencies that provide for children and new models of service delivery for meeting these needs....The evolving changes in the service system require professionals who are trained differently, who believe differently, and who function differently....A critical strategy for addressing these challenges is through collaborative relationships between the public service system and the universities" (p. 77). This chapter goes on to detail service system development, past practices and new strategies for treatment and manpower needs and academic training, and includes recommendations for changes in universities and states as well as in the National Institute for Mental Health and the Substance Abuse and Mental Health Services Administration. (jas)

Bishop, K. K., Woll, J., & Arango, P. (1993). Family/professional collaboration for children with special health needs and their families. Burlington: University of Vermont, Department of Social Work. (ERIC Document Reproduction Service No. ED 381 518)

> This monograph represents the collective thinking of parents of children with special health needs, family members, and professionals concerning what is necessary and important in collaborative relationships. Collaboration is viewed as a way to improve quality of life and health of children and their families, by working together to humanize the service delivery system in a spirit of shared ownership and responsibility. Seven

principles of family/professional collaboration are discussed. Family/professional collaboration (a) promotes a relationship in which family members and professionals work together to ensure the best services for the child and the family; (b) recognizes and respects the knowledge, skills, and experience that families and professionals bring to the relationship; (c) acknowledges that the development of trust is an integral part of a collaborative relationship; (d) facilitates open communication so that families and professionals feel free to express themselves; (e) creates an atmosphere in which cultural traditions, values, and diversity of families are honored; (f) recognizes that negotiation is essential in a collaborative relationship; and (g) brings to the relationship the mutual commitment of families, professionals, and communities. The monograph concludes with a list of people and programs involved in the University of Vermont's Family/Professional Collaboration Project and a list of key elements of family-centered care. (Contains 39 references) (JDD)

Blank, M. J., & Lombardi, J. (1991, June). Towards improved services for children and families: Forging new relationships through collaboration. Washington, DC: The Institute for Educational Leadership.

This policy brief synthesizes the symposium proceedings, (The Eighth Annual Symposium of the A.L. Mailman Family Foundation), capturing many of the details of successful collaboration. It is designed for use by others who are interested in facilitating change in their communities and states. We first provide an overview of what is meant by collaboration, and what distinguishes current efforts from earlier attempts at service integration. Second, we describe six key ingredients of successful efforts as they emerged in symposium discussion. Finally, we summarize the closing remarks by Lisbeth Schorr and draw some conclusions regarding the overall message of the symposium, and further directions for promoting a collaborative approach to improved services for children and families. (p. 5)

Casto, R. M. & Julia, M. C. (Eds.). (1994). Interprofessional care and collaborative practice. Pacific Grove, CA: Brooks/Cole.

Written by a team of professionals, the purpose of this book is to provide materials for those engaged in learning about the dynamics, techniques, and potential of interprofessional collaboration. Part one reviews basic assumptions, the context for collaborative practice, relevant research and literature, and the ways professionals enter their vocations. Part two presents both an overview and an indepth discussion of the group process. Part three discusses methodologies for interprofessional practice, and considers models for collaboration, as well as the processes of interprofessional teamwork and educational goals and methodologies. Part four consists of case studies and a list of selected codes of professional ethics. Part five presents a model program for

interprofessional education and practice. The book concludes with a detailed review of the process used by the team of authors in writing this book and how this process of joint authorship can serve as a model for interprofessional collaboration. (jas)

Clark, T. A. (1991, December). Collaboration to build competence: The urban superintendent's perspective. Washington, DC: Office of Educational Research and Improvement (ERIC Document Reproduction Service No. ED 341 748)

The Collaborative Efforts Action Group of the Urban Superintendents' Network moved from an examination of the roles of schools, businesses, and community agencies in improving the quality of education in America to promoting the creation of comprehensive collaboratives that can strengthen family and community life. This report shares what superintendents have learned about collaboration. Strategies for developing the united front necessary for viable comprehensive collaborations are described in the following sections: "Introduction: The Spirit of Collaboration"; "Building on Partnerships"; "Key Collaborative Players"; "Characteristics of Successful Collaboratives"; "Measuring Success"; and "Shaping Collaboratives for the Future." The superintendents urge colleagues in the nation's cities to explore the possibilities, broaden their perspectives, and lower bureaucratic barriers that inhibit children from reaching their full competence. Included are a 53-item list of references and a 37-item list of selected school community partnerships in 24 cities. (SLD)

Davis, K. E. (1993). State mental health systems and universities: A conceptual model for collaborative service. In P. Wohlford, H. F. Myers, & J. E. Callan (Eds.), Serving the seriously mentally ill: Public-academic linkages in services, research, and training (pp.105-113). Washington, DC: American Psychological Association.

The purpose of this chapter... is to define and explore the concept of collaboration, as well as to compare and contrast its benefits and risks as a strategy for helping state and mental health systems and universities resolve alternative human resource problems. In the concluding sections of the chapter, various models of collaboration are presented to demonstrate the value of collaborative versus competitive strategies. (p. 105)

Dunkle, M., & Nash, M. (1989, March 15). Creating effective interagency collaboratives. Education Week, 8(25), 44 & 35.

Stating that, "With an access to young people unrivaled by any other social institution, schools are being asked to play a greater role than ever before in serving the nonacademic needs of students, especially those who are classified as 'at risk'" (p. 44), this

commentary discusses the difficulties of educators, health care providers, social service workers, juvenile justice workers, employment specialists, and community or religious leaders have in creating an effective means of collaboration among their respective professions. Problems such as crossing traditional boundaries, sharing resources, development of a common language, flexibility within agencies, and understanding the mandates of the various agencies are discussed. The role of leadership within the agencies and the important part it plays in collaboration is also addressed. The commentary concludes with a discussion of the Equality Center, a nonprofit organization in the state of Maryland, that "has worked closely with both the state of Maryland and individual school districts within the state in developing successful collaboratives" (p. 35). (jas)

Fischer, P. M. (1989). The physician's perspective. In M. L. Henk (Ed), Social work in primary care (pp. 172-181). Newbury Park, CA: Sage Publications.

Written from a personal point of view, this chapter describes the physician-author's introduction to social workers through vignettes. The chapter goes on to discuss interprofessional collaboration and the roles that both physician and social worker can play in the changing health environment. Suggestions are offered as to how to accomplish these new roles and what qualities are best for overcoming the resistance to change that exists throughout the caring professions and in the patients they serve. (jas)

Gray, B. (1989). Collaborating: Finding common ground for multiparty problems. San Francisco: Jossey-Bass.

This book focuses on the use of collaboration as a strategy for solving the many problems faced by society today in business, government, labor, and communities. The book is divided into four parts. In part one, the first chapter establishes the need for collaboration, and the second chapter discusses why collaborative initiatives are increasing. In part two, the third chapter describes the three-phase process by which collaborations unfold; chapter four demonstrates the success of the sequential process. chapters five and six illustrate the political dynamics associated with collaboration, and chapter seven considers the role of the mediator in collaboration. In part three, chapter eight classifies collaborative designs into four general types, and chapter nine discusses them in detail. Part four describes the challenges of collaborating. Chapter ten looks at collaboration from the organizational theory perspective, and chapter eleven offers a practical orientation to organizing a successful collaboration. Chapter twelve examines the challenges of developing shared stewardship and closes with predictions about the "transformative potential that collaborations afford us for coping with critical local, national and international problems" (p. xx). (jas)

Kadel, S. (1992). Interagency collaboration: Improving the delivery of services to children and families. Tallahassee: Southeastern Regional Vision for Education. (ERIC Document Reproduction Service No. ED 349 511)

This report focuses on interagency collaboration in the delivery of social services to children and families. Section I discusses the "why" and "what" of collaboration and family service centers. It addresses the common questions of potential collaborators who may have little or no background information on the subject. Section II offers steps, advice, and strategies for collaborating and for establishing family service centers. The information is designed to be used by local-level collaborators and community members. Political and regulatory constraints to implementing integrated services are also discussed. Section III provides information on state- and national-level collaborative action. Local projects can use this information to seek financial support, technical assistance, or options for networking with others. Relevant legislation and possible sources of financial support are included. Section IV and appendices offer additional information about publications and tools to aid a collaborative effort through each stage of development. Appendix A discusses interdisciplinary education programs and is geared toward university and college faculty who educate service professionals. Appendices B, C, D, and E offer sample needs assessment surveys, staff oath of confidentiality, release forms, and excerpts from Alabama and Florida state legislation. There are approximately 100 references listed. (ABL & aws)

Kagan, S. L. (1991). United we stand, Collaboration for child care and early education services. New York: Teachers College Press.

This book addresses the ambiguity surrounding the outcomes of collaboration as well as its process, rationale, and history in early care and education. The author, through a selective process, has examined the volumes of literature on the collaborative process and presented in this book, "those events, issues, and constructs most relevant to enhancing understanding of collaboration's evolution, rationale and practice in early care and education" (p. xii). The first four chapters (a) offer a variety of definitions of the term collaboration and determine the one definition used in this book, (b) draw on literature outside the field of early care and education for an examination of the term in its social context, (c) discuss the rationale and benefits of collaboration as reviewed in the general literature, and (d) present a distillation of "the numerous frameworks that have been advanced to understand collaborative functioning" (p. xiii). The last six chapters address collaboration as it applies to (a) the history of early care and education, (b) the early federal initiatives, (c) the special case of special education, (d) the current efforts in collaboration, (e) some challenges facing collaboration, and (f) what the future might bring. (jas)

Kagan, S. L., & Rivera, A. M. (1991, November). Collaboration in early care and education: What can and should we expect? Young Children, 47(1), 51-56.

This article addresses the process of collaboration sometimes defined as a "buzzword," "social penicillin," or "dancing with an octopus," depending on how it is perceived and who is doing the defining. Issues dealt with in this article are (a) why collaboratives are so popular now, (b) what collaborations are, (c) what collaborations achieve, (d) when collaborations work best, including five possibilities, and (e) what can be done to help collaborations achieve success, including three answers, namely, practice, research and policy. The article concludes with "an accolade and a caution" (p. 56). According to the authors, there is a lot of success throughout the nation in improving the delivery of early care and education services through collaborative services, but the reader must take into consideration that collaboration is a strategy, not a panacea, and all avenues should be explored to achieve effective delivery. (jas)

Kagan, S. L., Rivera, A. M., & Parker, F. L. (1990, September). Collaborations in action: Reshaping services for young children and their families. New Haven: Yale University, The Bush Center in Child Development and Social Policy. (ERIC Document Reproduction Service No. ED 328 363)

A study was conducted to (a) enrich the knowledge of collaboration among child and family services providers by identifying and describing effective early care and education collaborations, and (b) create an analytic framework for the study of critical issues affecting the ability of collaboration to improve the quality, comprehensiveness, and availability of services to children from birth to 8 years of age. Collaboration refers to systematic multilateral efforts that seek to improve services rendered by all collaborative parties. Chapter I sets the context of the study and identifies study goals. Chapter II delineates methods and limitations of the study. Chapter III discusses the sample of collaborations studies and their general characteristics. Chapter IV analyzes the ways in which the collaborations function and also covers the developmental process of the collaborations and the variables that mediate that process. These variables include goals, resources, power, and leadership. Chapter V delineates the outcomes of collaboration, particularly quality, access, comprehensiveness, equity, public information, advocacy, and cost-effectiveness. Chapter VI discusses the findings. Chapter VIII discusses implication for practice, policy, and research. Chapter VIII profiles the 72 collaborations studies. Related materials are appended. (RH)

Kantor, R. M., (1994, July-August). Collaborative advantage: The art of alliances. Harvard Business Review, 72(4), 96-108.

This article, written from a purely business point of view, addresses many issues found in collaborative efforts. Three fundamental aspects of business alliances are reviewed: (a) They must yield benefits for all the partners, (b) they must create a new

value together; and (c) they require a "dense web of interpersonal connections and internal infrastructures that enhance learning" (p. 97). Using the analogy of courtship and marriage, the article goes on to discuss the varieties of relationships, the selection and courtship of partners, the initial start-ups for groups getting involved with each other, the day-to-day realities, and the five levels of integration which make a successful relationship: strategic integration, tactical integration, operational integration, interpersonal integration, and cultural integration. The article concludes with a discussion of the changes that may occur within each partner as a result of collaborative efforts. (jas)

Kiesler, S. (1994, Fall). Working together apart. Cause/Effect, 17(3), 8-12.(ERIC Document Reproduction Service No. EJ 491 379)

Collaboration between professions or disciplines or across distances is discussed. A definition of collaboration is offered; processes and factors making collaboration difficult are identified; and two features of networked communication (access equalization and social equalization) that are important to collaboration are examined. (author and MSE)

Lawson, H., & Hooper-Briar, K. (1994). Expanding partnerships: Involving colleges and universities in interprofessional collaboration and service integration. Oxford, OH: The Danforth Foundation and the Institute for Educational Renewal at Miami University.

The result of a three-year study, this report examines both the desire of professionals to work as teams, interprofessional collaboration, and the attempt to build "seamless" educational, health, and social services, integrated within schools. Part 1, "Report on Findings," discusses the project, the methodology for the research, and some of the changes that occurred in the original research plan due to findings in the field. One such finding was that instead of "pure models" of school-linked collaborations and service integration initiatives, "hybrids" were found emphasizing the fact that there are many variations complicating the work of identifying the implications for colleges and universities as they seek to become involved in professional preparation for interprofessional collaboration and service integration. Part 2, "The Involvement of Colleges and Universities: A Call for Action," examines the issues of (a) making the case for involvement by higher education institutions, which, when it exists, benefits both the colleges and the universities as well as the local communities; (b) expanding partnerships across the professions and disciplines as a way of revitalizing missions and gaining uniqueness; (c) the necessity of interprofessional education; and (d) the importance of gaining and sustaining faculty commitment and involvement in community collaboratives. The report ends with a discussion of the emerging and lingering questions concerning interprofessional collaboration and services integration. (jas)

Leukefeld, C. G., & Battjes, R. J. (1989). Interprofessional collaboration. In M. L. Henk (Ed.), Social work in primary care (pp. 145-159). Newbury Park: Sage Publications.

The purpose of this chapter is to review social work's role in primary health care as an integral part of the health care team. After considering challenges to interdisciplinary collaboration identified by the Joint Commission on Interprofessional Affairs (JCIA), the emergence of the interdisciplinary team in primary care is addressed. Role expectations and conflicts are briefly reviewed and examined, and factors that facilitate team development are considered. The chapter concludes with brief remarks to social work and the health care teams. (p. 145)

Levy, J. E, Kagan, S. L., & Copple, C. (1992, March). Are We Ready? Collaboration to support young children and their families. Washington, DC: American Public Welfare Association and Council of Chief State School Officers. (ERIC Document Reproduction Service No. ED 365 425)

This paper discusses the importance of collaboration across social service and educational sectors as a way of achieving a coherent and integrated system that ensures that young children receive the high quality of care and education they need and that also maximizes the use of federal, state, and local resources. Section 1 of the paper discusses the nation's commitment to six education goals and the challenges of finding more effective means whereby programs for the poor and the working poor, especially child care and early childhood programs, can reach the children who need them. Section 2 explores the extent to which all children are ready to learn and the extent to which society is ready to support young children. The characteristics of an early care and education system that works for children and families are explored in section 3. Section 4 describes the major sources of new or expanded support for young children and their families. Section 5 identifies the need to create a shared vision for young children and their families, and to establish a sustainable cross-sector mechanism to carry out long-term planning and implementation to bring the vision to reality. This section also discusses the need to build linkages among the various program components, develop joint or coordinated responses to problems in the current set of programs and services, and strengthen the overall capacity to connect disadvantaged families to high-quality developmental services. A 22-item bibliography on early childhood programs and new funding is included. (SM)

Liontos, L. B. (1991). Social services and schools: Building collaboration that works. Eugene: Oregon School Study Council. (ERIC Document Reproduction Service No. ED 343 264)

Public schools and social service agencies often serve the same clients and have

some of the same goals. To achieve many of the goals that each sector is placing on its own reform agenda, complementary action is a must. For this publication, 13 interviews were conducted with both educators and social workers who have gained experience in the tasks of initiating, leading, and building support for collaboration. Their ideas and advice are intended to serve as a guide for all who are presently involved in collaboration between schools and social services or who want to begin such relationships. Chapter 1 looks at the first question any schools or agencies ask about collaboration: "Whose responsibility is it?" Perhaps the central part of the collaborative process is determining how to go about establishing relationships between schools and agencies, which is the subject of chapter 2. Chapter 3 deals with the fears and problems that can arise in collaboration and how these barriers can be overcome. Chapter 4 addresses leadership, ownership, and responsibility and examines how these three areas are linked. A list of the persons interviewed is appended. (21 references) (MLF)

National Health Education Consortium (1992, February). Creating sound minds and bodies: Health and education working together. Washington, DC:author. (ERIC Document Reproduction Service No. ED 352 362)

Collaboration between health and education providers is essential to address the urgent needs of children and families most at risk of school failure and severe health problems. Collaboration represents a fundamental change in the way education and health systems think about, identify, and meet the needs of children, youth, and families utilizing a holistic approach. This report, organized into five sections, sets the stage for action. The first section looks at policy issues of health/education collaboration, including strategies to clear the hurdles that are in its path; issues of funding; the appropriate role of state and federal governments; and specific issues involving programs aimed at infants, toddlers, preschool children, and schoolage children. The next three sections provide examples of health/education collaboration at the state, local, and federal levels. The final section presents an annotated bibliography of useful sources for policymakers and providers concerned with health and education collaboration. Collaboration is not an end in itself but a means to an end; it is a process, rather than a product, and policymakers must provide incentives for collaboration, resources to fund collaborative initiatives, and support for front-line providers at all levels. (LL)

Rodriguez, E., McQuaid, P, & Rosauer, R. (1988, February). Community of purpose: Promoting collaboration through state action. Denver: Education Commission of the States. (ERIC Document Reproduction Services, ED 306 700)

This paper is the fifth in an Education Commission of States (ECS) series focusing on the problems of youth at risk of not successfully making the transition to adulthood. The topic of the paper is collaboration--both interagency and public/private--and the

contribution that collaborative efforts can make in programs targeted for youth who are at risk. ECS conducted a 50-state survey of state-initiated programs for youth at risk of school failure. More than 700 telephone interviews were conducted with deputy commissioners of education, agency and department program directors and youth services practitioners. Issues concerning at risk youth are raised through the examination of some ongoing statewide collaboration. The issue of how states can capitalize on existing resources is explored. Appended is a list of ECS members, staff, and cooperating organizations. (SI)

Section B

Burchard, J. D., & Schaefer, M. (1992). Improving accountability in a service delivery system in children's mental health. Clinical Psychology Review, 12, 867-882.

A Vermont legislator who served on the House Appropriations Committee once remarked, "If human service agencies were forced to compete in the private sector, most of them would go out of business in less than a year--their product is people and they have no idea what happens to them after they are served." This article begins with a discussion of the increasing concern for public agency accountability and some of the limitations of more traditional program evaluation methods for meeting this need. Three methods are described that have been utilized to monitor the progress of children receiving services within a public service delivery system. The methods include the measurement of daily adjustment, residential and educational service tracking, and an approach for integrating and displaying individual case information related to child behavior, life and family events, services received, and service costs. A description and illustration of each method is followed by a brief discussion of issues related to implementation and utilization. Future developments, which include methods to track units of service and youth and parent satisfaction, are also discussed. (authors)

Chaskin, R. J., & Richman, H. A. (1992, Spring). Concerns about school-linked services: Institution-based versus community-based models. Future of Children, 2(1), 107-117.

The systems that serve families and children should address the basic developmental needs of children. Those needs can best be met within a broadly defined service system that offers both services to promote general development as well as services to respond to the specific problems of individual children in trouble. The question the authors address is whether the model of school-linked, integrated services that places the school in the central position to facilitate access to necessary services is the best approach. Although the school may seem to be the logical choice as the lead institution, the authors cite arguments against building a governance structure that favors any single institution. They contend that multiple access points are essential for serving all children in a community and that citizens should participate in defining their community's needs and the strategies for meeting them.

Chaskin and Richman present an alternative to the school-based model. They describe the community-based model, in which a diversity of service providers, administrative contexts, and institutions work under collaborative governance in a system of linked services. A community-based system involves the major public and private entities in the community, including schools, social services, churches, health providers, and other community organizations which collaborate within a consortium of existing

agencies or a newly created entity. (authors)

Coursey, R. D., Weinstein, S. E., & Deckelnick, L. E. (1993). Developing the Maryland training consortium on serious mental illness. In P. Wohlford, H. F. Myers, & J. E.Callan (Eds.), Serving the seriously mentally ill: Public-academic linkages in services, research, and training (pp.143-155). Washington, DC: American Psychological Association.

"The concept of linkage is sometimes thought of as a connection between the public services system and the state university. However, the reality--at least in our state (Maryland)--is that systemwide linkages are needed among the mental health center, rehabilitation services, hospitals, the multiple educational institutions, and the human resource development staffs from the state, county, and private nonprofit organizations" (p. 143). This chapter goes on to discuss the development of a statewide consortium among three major players in the state: the Maryland Human Resources Development Division of the Mental Hygiene Administration (MHA), the Maryland Association of Psychiatric Support Services (MAPSS); and selected departments at the University of Maryland. Details of the development of the consortium such as forming the group of key persons, addressing the issues of group dynamics such a trust, and setting objectives were presented. The authors conclude with a discussion of the future directions of linkages in the state, a description of a new model for training programs, and, finally, a discussion on the fundamental principles underlying all successful linkages, "that there be a mutual benefit to all the parties involved" (p. 151). (jas)

Dunkle, M.C. (1995). Who controls major federal programs for children & families, Rube Goldberg revisited. Washington, DC: The Institute for Educational Leadership.

[This timely monograph provides] an in-depth look at the Congressional committees and executive branch departments that have primary responsibility for major federal programs affecting children and families. [It begins by describing] the desperate shape of too many U.S. children and families, and outlines the connections among educational, health, social service, income, housing and other needs. Next it details the insidious effects of trickle-down fragmentation--that is, how the federal piecemeal approach affects families, communities, and states. "A Blueprint of Federal Fragmentation" analyzes the multiple Congressional committees and Executive Branch departments that have primary responsibility for programs affecting children and families. And, finally, there are suggestions for making federal policies more coherent and effective, both in the U.S Congress and in the executive branch.(p. 2) (Seven appendices included) (jas)

Farrow, F. & Joe, T. (1992, Spring). Financing school-linked, integrated services. Future of Children, 2(1), 56-67.

Financing strategies affect the nature and outcomes of school-linked services, particularly as state and local budgets tighten. Potential funding sources for school-linked programs include a wide range of federal, state, and local programs administered through the education, social services, and health care systems. And, though these funding streams offer genuine opportunities, they also pose numerous barriers. There barriers include fragmentation of funding within a categorical system, funding that is available for crises only, and the lack of a universal entitlement approach that could fund services to achieve broad coverage of vulnerable populations.

The patchwork of funding strategies now used for school-linked services has resulted in small-scale, temporary programs rather than long-term programs that are systemically, developed and funded. Achieving stable funding requires compelling evidence that school-linked programs meet their goals and a constituency and political leadership that support such programs. This article suggests that the fiscal strategy for building school-linked services involves supplementing new core program funding with redirected, existing dollars and increasing utilization of Medicaid funds. (author)

Firestone, W. A., & Drews, D. H. (1987, January). The coordination of education and social services: Implications from three programs. Philadelphia: Research for Better Schools, Inc. (ERIC Document Reproduction Service No. ED 291 002)

This study addressed concerns of Pennsylvania legislators and government departments by examining coordination between education and other human service agencies in three program areas: early intervention (for preschool handicapped children), student assistance (for drug and alcohol abuse and other teenage problems), and teenage pregnancy and parenting. It sought to clarify the nature of the coordination problems that arose and the reasons for those problems in order to make recommendations about how to alleviate them in the future. Interagency conflict and service blockages were found to be independent problems for coordination. For teenage pregnancy, institutional survival concerns were the primary contributor to interagency conflict. The main cause of interagency conflict in student assistance was treatment philosophy and the main blockage to coordination was service capacity. For early intervention coordination, the main blockage was again service capacity. Conclusion and recommendations included (a) coordination can increase the cost of services by increasing the demand; (b) coordination is facilitated by complementary interests; (c) arrangement that minimize competition between agencies should be established; (d) regulations contribute to coordination problems; (e) coordination is facilitated when programs have a clear purpose compatible with the philosophies of other involved parties; (f) local coordination councils can facilitate coordination; (g) planning and adjustment to facilitate coordination must continue after new projects have started; and (h) increased resources are often needed to reduce service blockages. (ABL & aws)

General Accounting Office (1992, September). Integrating human services. Linking at-risk families with services more successful than system reform efforts. Washington, DC: General Accounting Office. (ERIC Document Reproduction Service No. ED 356 591)

This report reviews approaches that federal, state, and local governments have used to integrate the delivery of health and other educational and social services to at risk families, and examines barriers to designing and implementing integrated service delivery systems. The report contrasts "system-oriented" integration efforts, which create new systems that would deliver services more comprehensively, and "service-oriented" efforts, which link clients to existing services and unite various service providers. Two federal programs are reviewed--Project Head Start and Part H of the Individuals with Disabilities Education Act--along with a state-private child welfare initiative supported by the Annie E. Casey Foundation. The Part H and the state-level Annie Casey initiatives illustrate the system-oriented approach, while Head Start and the local-level service delivery components of the Annie Casey initiatives represent the service-oriented approach. The report concludes that service-oriented initiatives have been more successful, and urges that Congress be cautious in considering initiatives that call for state and local government to make fundamental changes in service delivery systems, because the obstacles and risks of failure are great. Appendixes describe past federal efforts to integrate services and describe the service integration programs which were examined for this report. (JDD)

Gomby, D. S., & Larson, C. S. (1992, Spring). Evaluation of school-linked services. Future of Children, 2(1), 68-84.

Evaluation of school-linked service initiatives, which are characterized by great flexibility and variability, is challenging but also possible and desirable. Indeed, every school-linked service effort should undergo some level of evaluation, whether for the purpose of honing an existing program or for providing evidence of its effectiveness. Evaluations of previous school-linked service programs offer limited support for the school-linked service movement and indicate how complex programs placed in the schools can be evaluated with sensitivity and rigor. Evaluation can serve as a useful tool to program providers, policy makers, and funders, but each group must make significant commitments to ensure a meaningful and high-quality evaluation. Expansive, unevaluated programs that are continued year after year and that are based only on hunches or political winds can represent a waste of millions of dollars as well as lost opportunities to try what could well be more effective approaches. (author)

Greenberg, M., & Levy, J. (1992, January). Confidentiality and collaboration: Information sharing in interagency efforts. Washington, DC: American Public Welfare Association. (ERIC Document Reproduction Service No. ED 345 402)

Confidentiality issues in cooperative relationships between schools and agencies providing services to children and families with special needs are examined. Introductory sections consider the need to share information and the nature of confidentiality restrictions. A section on overall information sharing considers when to address the confidentiality issue, whom to involve, clarifying reasons to share information, identifying and addressing legal and nonlegal issues, and interagency agreements and memoranda of understanding. The next section looks at "informed consent" as the basis of information sharing, examining whether there should be a common release form, content of release forms, presenting the release form and obtaining consent, who can grant consent, handling situations where consent is difficult to obtain, and the use of structural or staffing arrangements to remove the need for consent. The following sections look at the use of data at an aggregate level and special considerations when using automated systems for information sharing. Guidelines for protecting confidentiality cover staff training, limiting exchange, extra safeguards for particularly sensitive information, and the re-release of information. Briefly noted is the state legislature's role. Appendices provide sample forms, a checklist, federal statutes and regulations, and a list of seven resources. (DB)

Kirst, M. W. (1991, April). Integrating children's services. Menlo Park, CA: EdSource (a paper presented at a March 1991 EdSource Conference, "Stretched to the Limit: What's Next for Education")

Four major points were made during this address. First was a discussion on why there is so much concern about the need for a broader children's policy to supplement education including four differing approaches expressed by various political leaders. The second point reviewed five of the deep underlying root problems of the current system. The third issue looked at the preconditions needed for change beginning with definitions of school-linked services, collaboration, children's finance, school restructuring, and overall outcomes. The fourth point examined the current scene in California with a proposal for demonstration projects. The paper concluded that "the name of the game is change, schooling will not be the sole way to approach these financing, service delivery, programmatic, and evaluation questions in the future" (p. 8). (jas)

National Health/Education Consortium (n.d.). Bridging the gap: A health card primer for education professionals. Washington, DC: Institute for Educational Leadership.

This primer is aimed at those who want the education and health systems to work more closely together at the community, state, or even national level. By providing a brief overview of the health care and the education systems and presenting concrete action steps that can be taken to connect these sectors, we hope to help move this nation a step closer toward ensuring the health, well-being and education of all children. (health 1)

Orloff, T. M., Rivera, L., Harris, P., & Rosenbaum, S. (1992, July). Medicaid and early intervention services: Building comprehensive programs for poor infants and toddlers. Washington, DC: George Washington University Center for Health Policy Research.

> All children need comprehensive health care, especially during infancy and early childhood. For families with children who have disabilities, access to coordinated and comprehensive care is particularly challenging. Early comprehensive services for children with disabilities are expensive, but they have been shown to be effective economically, medically, and socially over the long term.
>
> Two federally funded programs can play a significant role in building comprehensive health service programs for low-income infants and toddlers with, or at risk for, disability and developmental delay. These two programs are Medicaid (and its special pediatric health program known as Early and Periodic Screening, Diagnosis and Treatment--EPSDT) and Part H of the Individuals with Disabilities Education Act (IDEA), commonly known as early intervention (EI). This special report analyzes both programs and identifies ways in which they can together develop and support a broad set of health and therapeutic services for children. (Executive Summary, p. i)

Rigsby, L. C., Reynolds, M. C. & Wang, M. C., (Eds.). (1995). School-community connections: Exploring issues for research and practice. San Francisco: Jossey-Bass.

> This book, with contributions from a variety of disciplines and professions including business administration, communications, curriculum and instruction, educational psychology, sociology, urban studies, social work, educational policy, psychology, and other social science-related fields as well as policy makers at federal, state and local levels, is the result of an invitational conference on school-linked coordination of services for children and families in urban communities titled School-Community Connections: Exploring Issues for Research and Practice. A basic guide of the conference was the issue of drawing from both theory and practice and the seeking of answers to the many complex questions that arise when the various stakeholders and their conflicting perspectives on school-community linkages seek a common ground. The chapters are divided into four general areas: (a) "The Policy Debate," which includes the keynote address, (b) "Key Organization Issues," which addresses efforts to mount collaborative programs, (c) "The Social Context," which examines collaborative programs within the social context of schools and (d) "Lessons from Existing Programs," which analyzes programs already in existence. (from preface, jas)

Sandler, L., Bierlein, L., Vandergrift, J. A., Dickey, L., & Higgins, K. (1994, October) Linking schools and health services: Arizona view. Tempe: Arizona State University, Morrison Institute for Public Policy. (ERIC Document Reproduction Service No. ED 378 673)

During 1993-94, the Morrison Institute for Public Policy at Arizona State University conducted a study on behalf of the Arizona Department of Education. This document presents findings of that study, which examined linkages between health services and schools for a comprehensive service delivery to students. Following the introduction, chapter 1 provides a national overview on children's health and the public schools, presenting national and legislative initiatives and a framework for linking health services and schools. Chapter 2 reviews what is known about the major issues in child health in Arizona and its schools, synthesizing health data from several sources. Survey results from 531 Arizona school principals about school-based/school-linked health and social services are also analyzed. A discussion of the Arizona perspective follows in chapter 3, which examines the philosophy guiding state initiatives, key players, the processes that support school-based/school-linked health services, and a sample of current state activities. The fourth chapter provides a view of how some Arizona schools are attempting to address these issues through the provision of student health services at or near school sites. The last chapter reviews action necessary to facilitate linkages between schools and health services, and the status of Arizona efforts. It concludes with some considerations for the future. A conclusion is that the state is making significant progress toward promoting and, in some schools, implementing such services. Eight tables and seven figures are included. (LMI)

Soler, M. I., Shotton, A. C., & Bell, J. R. (1993, March). Glass walls: Confidentiality provisions and interagency collaborations. San Francisco, Youth Law Center.

This study was conducted on the premise that the protection of personal privacy and the improvement of services through information-sharing are not mutually exclusive goals. Thus, while the study focuses on barriers to collaboration, it begins with an analysis of the interests of children and families in protecting information from disclosure (p.2). The analysis of confidentiality provisions in statutes and regulations and the identification of mechanisms and strategies that can be used as models are two of the main purposes of this report. A major conclusion that "confidentiality provisions are not significant barriers to interagency collaboration, and virtually all information-sharing problems can be resolved by using mechanisms such as written releases that are authorized by statutes and regulations" (p.3). Chapters discuss privacy interests and confidentiality restrictions, records that are not confidential, protecting privacy and allowing information-sharing, confidentiality in aggregate information systems, and protecting confidential information in practice. The report concludes with 34 appendices regarding the laws on confidentiality in the federal and various selected state statutes and regulations. (jas)

Soler, M. I. (1992, March). Interagency services for children and families: questions, answers, and more questions. Menlo Park, CA: EdSource (a paper presented at a November 1991 EdSource Conference "Seeking Success for Children")

This address frames the issues that must be considered in moving forward on providing services to children. The context for children, i.e., the increase in the number of poor children; the availability of funding and our fiscal priorities; the systems designed to protect children and their families, but don't; and the problems of too little money, too many forms, too many regulations at the bottom, not enough leadership at the top, too few staff with not enough training, and too many clients to handle are outlined and discussed. Some fundamental questions about responsibility are asked, some basic principles are reviewed, and the growing movement toward collaboration is considered. Six concerns are listed: (a) the need to develop and adhere to a common terminology; (b) the need to have clear goals and objectives for interagency efforts, (c) the need for controlled research; (d) the need to know about specific aspects of case management and make interagency provision of services effective; (e) the need to know about cost effectiveness of interagency provision of services; and last, (f) the need to develop better information management systems. (jas)

The Annie E. Casey Foundation. (n. d.). The path of most resistance. Reflections on lessons learned from New Futures. Baltimore, MD: author.

This report, published by The Annie E. Casey Foundation, is a reflection on a five-year, $10 million dollar grant offered through the New Futures Program to selected cities throughout the United States in 1988. This five year initiative was "aimed at preparing disadvantaged urban youth for successful lives as adults. Designed as a response to the alarming number of young people dropping out of school, becoming teen parents, and leading idle, unproductive lives, New Futures was unusual, if not unique, among children's initiatives in the late 1980s" (p. v). Five cities, Pittsburgh, PA, Bridgeport, CT, Savannah, GA, Little Rock, AR, and Dayton, OH took part in the program. Chapter headings, indicating the lessons learned through this project, include, "Comprehensive Reforms are Very Difficult," "It Takes Time," "It's Not for Every Community," "Building Local Ownership is no Simple Matter," "Refine and Modify Plans," "Communicate," "Real Change often Depends on Increases in Economic Opportunity and Social Capital," and "Stay At It." (jas)

Thomas, C. F., English, J. L., & Bickel, A. S. (1993, September). Moving toward integrated services: A literature review for prevention specialists. Portland, OR: Western Regional Center for Drug-Free Schools and Communities. (ERIC Document Reproduction Service, ED 363 007)

This document was written for prevention specialists who plan or implement integrated services in their communities or school districts. Chapter 1 explains why integrated, school-linked services are needed. Chapter 2 outlines the elements of

successful integrated services and barriers to implementation. The third chapter describes three approaches, ranging from categorical model (the simplest), the student-focused model (midrange in the continuum), and the integrated-services model. The final chapter describes six integrated-services programs in the western United States and lists contact organizations. Four figures and one table are included. Appendices contain a matrix depicting elements of success and a recommendation form for successful integrated-services programs. (LMI)

Vladeck, B. C. (1989). Epilogue. In R. E. K. Stein (Ed.), Caring for children with chronic illness, Issues and strategies (pp. 282-301). New York: Springer.

"To begin with, if one conclusion emerges clearly from the literature...on children with chronic illness, it is that effective services support not only the ill child but the child's entire family" (p. 283). This chapter goes on to discuss the integration of medical and social services and the difficulties faced, the relationship between chronically ill children and high technology where the skill level is higher at the diagnosis level and less so at the "human factor" level, the difficulties of "good" case management and how to ensure that it is done well, and the issues that emerge where poverty and chronic illness in children meet. The chapter concludes with a list of objectives that need to be addressed in order to get all chronically ill children and their families the services they need (jas)

Part IV

DESCRIPTIONS, MODELS AND EVALUATIONS OF INTEGRATED SERVICE PROGRAMS

Entries in this section either describe, model or evaluate actual integrated services programs. Included are research papers that describe methodology used and survey results, as well as conference papers, journal articles, and reports. Some listings describe only one program; others describe a number of programs. Many discuss the processes used to link services to serve all at risk children and families.

Adam, H. M. (1989). Pediatric home care: An institutionally based outreach program. In R. E. K. Stein (Ed.), Caring for children with chronic illness, Issues and strategies (pp. 161-172). New York: Springer.

The Pediatric Home Care program at the Albert Einstein College of Medicine and the Bronx Municipal Hospital Center was developed in 1970 as a special ambulatory care unit for children with chronic illnesses. The goal of this highly specialized program for chronically ill children is to provide as normal a life as possible for the child and the family with a minimum of disruption. The basic unit, the Home Care Team, is comprised of three pediatricians, three nurse practitioners, and a social worker. Since the normal life for a child is home, school, and community, not a hospital, treatment and consultation takes place outside the hospital and in the home as much as possible. Other points addressed in this report include the patient acceptance of the home care plan, the nature of home care, the services offered by the team, and an evaluation of the services which are offered out of a municipal hospital serving inner-city children. The report concludes with a discussion on the feasibility of extending the services to other target populations such as middle-income families. (jas)

Bilotti, G. E. (1989). The Illinois model: A statewide initiative. In R. E. K. Stein (Ed.), Caring for children with chronic illness, Issues and strategies (pp. 185-195). New York: Springer.

The Illinois entry into home health care for chronically ill children began in 1979 when a child on a ventilator was sent home rather than kept in the hospital. Since that time, the Illinois Division of Services to Crippled Children, through a program based at the University of Illinois, has served approximately 30 children who are now in their homes. Using the case-management approach to home care, a system of care has been established which involves case managers, medical personnel, and medical social workers. Financial planning for home care is also discussed which includes the use of public aid, private

insurance, community resources such as United Cerebral Palsy, and personal family income. The chapter concludes with a series of problems and concerns, centered chiefly on the need to develop a better system of support for the families as well as effective management teams that will allow the entire team to remain involved with all parties concerned with home care. (jas)

Dolan, L. J. (1992, March). Models for integrating human services into the school Baltimore, MD: Center for Research on Effective Schooling for Disadvantaged Students. (ERIC Document Reproduction Service No. ED 347 244)

This report examines five models of school-based integrated human service programs to evaluate the effects of the programs in light of the growing support for and implementation of these programs. The study examined the following programs: school-based health clinics in Baltimore; Success for All (an elementary school-level program at 35 sites nationwide); the New Jersey School-Based Youth Services Program (human services); the New Beginnings program in San Diego providing health and social services; and the Comer School Development Model based on the model developed by J. Comer. The study sought to document some of the characteristics of programs perceived to be effective and to outline some of the evaluation strategies that might lead toward increased understanding of the impact of these programs on the children and families they serve. The report describes each of the programs in detail. A section on lessons from successful programs lists the following seven components important to success: (a) collaborative planning; (b) ownership by the school; (c) well-defined principal's role; (d) strong case manager; (e) shared resources; (f) gradual phase-in; and (g) training and staff development. A section on evaluation issues notes the need for current data and the high burden of data collection as well as the resistance to evaluation of still developing programs. Included are 16 references. (JB & aws)

Epstein, S. G., Taylor, A. B., Walker, D. K., Crocker, A. C., Gardner, J., Halberg, A. S., Mailloux, S. E. H., Murphy, A., & Tuttle, G. A. (1989). Project SERVE: A needs assessment and state planning model for Massachusetts. In R. E. K. Stein (Ed.), Caring for children with chronic illness, Issues and strategies (pp. 196-210). New York: Springer.

This chapter gives an overview of the participatory planning process that was designed in Massachusetts to address the unmet needs of children with chronic health conditions and their families. It includes a statewide model for a comprehensive assessment of the public role in serving children with special health care needs and a unified plan that evolved from the collaborative experiences of all involved in the care of these children--the state agencies, the providers, and the families. The three major sections of this chapter address the issues of (a) a general description of the project including the organizational framework, (b) the major components of the data-collection goals, and (c) the strategies used by the project to enhance the implementation of the planning

recommendations. A concluding recommendation is that participation from a broad constituency of people will lend credibility to future recommendations and will enhance the possibility of the implementation of the model. (jas)

Freedman, S. A., & Pierce, P M. (1989). REACH: A rural case-management project. In R E. K. Stein (Ed.), Caring for children with chronic illness, Issues and strategies (pp. 173-184). New York: Springer.

Project REACH--Rural Efforts To Assist Children at Home--was begun in Northern Florida to address the issues of chronic illness in children and the lack of in-home care in rural communities. An overriding assumption was that the program would reduce the costs to the state health care system by providing the in-home care needed. The chapter goes on to explain the need for a program which would go beyond immediate health care for children and would extend into the human needs of the family; the history of the movement within the state of Florida; the funding of the project through the use of public and private dollars; the development of a model; the design of a family-focused service structure; and the training of support personnel through specialized curriculum. Reporting systems and quality-assurance programs were initiated. Contacts with key political and medical leaders were maintained as well as the development of an externally designed evaluation system. Two major implications were noted, the service design and the financing. In sum, the REACH project is an example of a simple solution to a complex problem. (jas)

Health & Education Consortium Project, (n. d.). Building bridges, Lessons learned in interprofessional collaboration, Year one. Honolulu: Hawaii Medical Association.

This monograph addresses the first year's progress in the Maternal and Child Health Bureau's (MCHB) demonstration project "Health and Education Collaboration" (HEC) developed by the Hawaii Medical Association, as well as a brief overview of the two other MCHB projects "Partnerships for Change," Department of Social Work, University of Vermont, and "Higher Education Curricula for Integrated Services Providers," Teaching Research Division, Western Oregon State College. The role played by the National Commission on Leadership in Interprofessional Education is also considered. Five developmental stages of the HEC project, building a shared vision, staff recruitment; training; monitoring, evaluation and refinement; and dissemination are all discussed along with the lessons learned through each stage of the project development. There are also occasional "tips from the field," words of wisdom from the professionals working with the project. A continuing theme throughout the monograph is the issue of providing a medical home for every child. (jas)

Hewstone, M., Carpenter, J., Franklyn-Stokes, A., & Routh, D. (1994). Intergroup contact between professional groups: Two evaluation studies. Journal of Community & Applied Social Psychology, 4, 347-363.

We report two studies which evaluate practically- oriented programmes of interprofessional contact involving doctors and social workers. The evaluation is based on the 'contact hypothesis' in intergroup relations and highlights four sets of dependent measures; background perceptions, ingroup and outgroup ratings, knowledge, and judgements about work with outgroup partners and experienced contact. Consistent with the contact hypothesis, both studies revealed an improvement in outgroup attitudes, evidence of mutual intergroup differentiation (acknowledged superiority of ingroup and outgroup on independent dimensions), and increased outgroup knowledge. Greater change in Study 2 is interpreted in terms of its longer duration, and the opportunity it provided for contact with multiple outgroup members, compared with a single outgroup partner in Study 1. These findings from field studies are consistent with results from published laboratory experiments. (authors)

Hobbs, B. B. (1994, April). School-community agency collaboration in rural settings. New Orleans: Presented at the annual meeting of the American Educational Research Association (ERIC Document Reproduction Service No. ED 368 535)

A multiple-case study examined how schools and community human-services agencies collaborated to meet the needs of at risk youth in two rural Oregon counties. Four youth services teams (YST) were composed of approximately 10 members each, representing local public schools, county social and health services agencies, and local law enforcement units. Teams received referrals of high risk youth, met with each referred student and interested others (parents, school staff, caseworker), and developed an action plan for the student. Observations of YST meetings and interviews with YST members and selected school personnel examined the formation, structure and outcomes of collaborations. With regard to formation, results indicate that (a) the presence of a shared problem provided the impetus to collaborate; (b) there was no apparent advantage in having administrators versus direct-service staff act as conveners; and (c) failure to include representatives of all stakeholder groups early in the process led to misunderstandings and frustrations with YST work. Findings with regard to structure were (a) the failure to clearly define and agree upon objectives, roles, and responsibilities hampered YST efforts, (b) the education sector supplied most of the leadership and administrative support, (c) one organization typically served as the "fixer" to facilitate the process of collaboration, and (d) an organization's inkind contribution of personnel was often, in reality, an individual's contribution of personal time. Outcomes included improved communication between schools and community agencies, and increased access to community services for at risk youth. (author/SV)

Hochberg, M. R. & Lopez, M. E. (1993, December). A family matter. The Executive Educator, 15(12), 28-31. (ERIC Document Reproduction Service No. EJ 474 262)

Best preschool programs provide both developmentally appropriate curricula and school-based family support services. This article describes four exemplary, innovative, and low-cost early education programs in Kentucky, Colorado, Iowa, and Florida that integrate family support, day care, and health and social services. These districts had visionary superintendents adept at creating partnerships, capitalizing on limited funding and resources, and encouraging experimentation. (MLH)

Lutfiyya, M. N. (1993). Integrated services: A summary for rural educators. Charleston, WV: ERIC Clearinghouse on Rural Education and Small Schools. (ERIC Document Reproduction Service No. ED 357 906)

"Integrated services" refers to the collaborative delivery of educational, health, and social services for children and families that will give families a single point of entry into the delivery system. In some states, attempts to integrate social services delivery are part of education reform legislation. In Kentucky, schools link the services-delivery system with families and often have service centers located in school buildings. Such school-linked models are based on the assumption that school is often the dominant community institution, particularly in rural areas, and is the most convenient place to identify children in need of services. In West Virginia, community-based Family Resource Networks will provide services to all children and families. Proponents of community-based models argue that a community center provides a neutral nonthreatening location for persons disaffected by schooling and is not tied into the school bureaucracy. Whatever the model, the principles of case management are central to the idea of integrated services. Integration implies that the "case" is not the client but rather the array of services suited to the client's needs. Much of recent policymaking related to families has focused on central cities. While resembling suburban children in terms of race and family structure, problems of poverty and lack of services show that rural children are actually more like the children of the inner cities. Service integration programs, accompanied by a viable range of necessary services, could meet these rural needs. (SV & aws)

Smith, A. J., Jr. (1995, September). School-based case management: An integrated service model for early intervention with potential dropouts, (10). Clemson, SC: Clemson University, National Dropout Prevention Center.

"The purpose of this publication is to introduce school personnel concerned with early intervention with potential school dropouts to a promising school-based interprofessional case management model that has been successfully field-tested in 25 very different elementary school-communities in Idaho and Washington State over the past

seven years" (p. 1). The paper reviews the Center for the Study and Teaching of At-Risk Students (C-STARS) program at the University of Washington and the seven functions of the program: assessment, development of a service plan, brokering, service implementation and coordination, advocacy, monitoring and evaluation, and mentoring. The three structural components of the model, the case manager, the interprofessional case management team, and the comprehensive service network, are also discussed. The two most common strategies for applying this model are presented. The paper concludes with an overall summary of the results of the seven-year research study on the use of the model and suggests ways to get started in using the model. (jas)

The Institute for Educational Leadership. (1994). Linking schools with health & social services: Perspectives from Thomas Payzant on San Diego's New Beginnings. (1994). Washington, DC: Author.

This paper reports on a seminar at the Institute for Educational Leadership Policy Exchange which featured Tom Payzant, past superintendent of schools in San Diego and current Assistant Secretary for Elementary and Secondary Education at the U.S. Department of Education. Mr. Payzant is the co-founder of San Diego's New Beginnings, "an ambitious and collaborative initiative to provide comprehensive services to children and families" (p. 1). Persons attending the seminar were "senior Congressional and Executive Branch staff responsible for a wide range of programs for children and families (p. 1). Issues addressed in this seminar included understanding the program of New Beginnings and a discussion of some of its key principles; a listing of barriers to its success such as confidentiality issues, inflexible staff and rigid roles, and lack of a common philosophy; the importance of policy implications and an awareness of the local political picture, and the possible role of the federal government. (jas)

West Virginia Education Association and Appalachia Educational Laboratory. (1993, April). Schools as community social-service centers: West Virginia programs and possibilities. Charleston: Authors. (ERIC Document Reproduction Service No. ED 359 447)

Since schools are community institutions that have the most extensive and sustained contact with children, they have potential to serve as community centers for providing comprehensive and integrated social services. Schools are initiating programs that deal with children's needs beyond the academic realm; schools are calling on agencies and organizations to assist in providing services; and interagency collaboration is bringing together educators and service providers to develop programs that address social problems. This report resulted from the efforts of a study group of two teachers, a principal, an assistant principal, and a school/community relations director who explored school/community social-service partnerships in West Virginia. Forty school/community social-service programs in West Virginia are profiled. In addition to programs

descriptions, this document offers recommendations for planning and funding school/community social-services programs. A list of national organizations and West Virginia resources provides further information on available children's services, technical assistance for school-linked services, and research on children's issues. Programs described in the document deal with a variety of issues, including academically at risk students, after school needs, child abuse and neglect, counseling needs, dropout prevention, family support, health and basic needs, life skills, parenting skills, parent and adult education, preschool needs, self-esteem, substance abuse prevention and recovery, and teenage pregnancy and parenting. (NB)

Part V

RESOURCE DIRECTORIES AND BIBLIOGRAPHIES

Suggestions for directories and bibliographies are below. In addition, many of the papers listed in this annotated bibliography have extensive lists of references.

Lehman, C. M., & Searcy, J. A. (1995, October). Higher education curricula for integrated services providers: annotated bibliography. Monmouth, OR: Western Oregon State College, Teaching Research Division.

This publication includes books, papers, manuscripts, and articles organized in the following sections: "Descriptions and Evaluations of Integrated Services Programs," "Policies, Practices and Theories," "Technical Assistance Resources," "Interprofessional Education and Training Programs," "Resource Directories and Bibliographies," and "Publications of Interest in Understanding Challenges Facing Children and Their Families." In addition, many of the resources cited in this document contain lists of references and resources. (jas)

Newell, S., Jivanjee, P., Schultze, K. H., Friesen, B. J., & Hunter, R. (1994) Collaboration in interprofessional practice and training. Portland, OR: Portland State University (ERIC Document Reproduction Service No. ED 385 101)

This annotated bibliography lists approximately 95 citations on interprofessional, interagency and family-professional collaboration in delivery of children's mental health services. Section 1, "Interprofessional/ Interdisciplinary Collaboration: The Need," examines articles which describe new approaches to providing family-centered service, rationales for interprofessional collaboration, and ways in which interprofessional collaboration is believed to improve services to families. General principles for interprofessional and interagency collaboration are addressed in articles in Section 2, "General Principles of Interprofessional Studies," which includes an examination of the components of collaboration and the skills necessary for collaboration. Section 3, "Administrative and Policy Issues Related to interprofessional Collaboration," includes literature focused on organizational structures and policy supports for interprofessional/interdisciplinary and integrated teams and examines the elements of successful teamwork, including consensus building, shared decision-making, and conflict management. The elements of interprofessional collaboration methods discussed in the literature are presented in Section 4, "Methods of Interprofessional Collaboration for Direct Practice." Section 5, "Elements of Training Programs for Interprofessional

Collaboration," presents literature on the growing field of interprofessional training with publications on why training for interprofessional collaboration is needed; the attitudes, knowledge and skills for interprofessional collaboration; and approaches to teaching the skills of interprofessional collaboration. Section 6 presents model interprofessional service programs and training programs. (DB)

The Institute for Educational Leadership, Inc. (1992, October). Developing collaborative leaders, A selective bibliography of resources. Washington DC: Author.

The Institute for Educational Leadership is preparing this bibliography as part of its work in developing leaders who can bring together people from various sectors and agencies, and from different segments of communities, creating new systems and strategies for the empowerment of children and families. The bibliography is a work in progress, and we encourage individuals and organizations to share other resources that might be included (Table of Contents)

Walsh, M. E., with assistance from Bellanca, J., Brown, K., Chastenay, M., & Kabadian, M. (1996). Bibliography in process on integrated services/interprofessional collaboration and related areas. Boston: Boston College, School of Education

This document, in process, contains bibliographic citations in the following areas: parenting, family relations, and family services; adolescents, children in poverty/at risk, youth violence and prevention; substance abuse/crime; resilience; comprehensive health (mental and physical well-being); mental health; health education/AIDS; illiteracy/school drop-outs; education--reform and improvement; multicultural issues; interprofessional collaboration/integrated services; grant information; methodology; evaluation; university projects; knowledge bases of other professions relevant to education--law in education, nursing/health in education, psychology in education, and social work in education, and video tapes. Some citations include brief annotations. (jas)

Part VI

PUBLICATIONS OF INTEREST

Books, journals and reports that are of general interest are listed below including a video on collaboration. The material is broad based and may have use in an academic setting.

BOOKS

Finkelstein, N. E. (1991). Children and youth in limbo: A search for connections. New York, Preager.

The issue of the troubled American family and child care system is the focus of the five sections in this book. Part I, "Problems and Responses," identifies the multiple challenges affecting services to children and their families. The state of the American family is examined in the context of a variety of concerns including ethnicity, gender, alternative forms of relationships, family breakup, blended families, single-parent families, aging, and violence. Part I concludes with a discussion of children and youth in limbo and the need for a philosophic and practical response to a comprehensive system of care. Part II, "Community-Based Family Services," looks at the array of community services available. This array includes housing, child care, schools, family services, mental health clinics, special education, day treatment programs, and vocational education programs. Outreach prevention services for families at risk are also detailed. Part III, "Alternative Family-Based Services," discusses the issues of family foster care and adoption. Part IV, "Residential Group Care Services," examines the community-based group residence as one model of care, as well as the campus-based residential care and Part V, "Organizational Implications," looks at the process of change including the role of boards of directors, staff recruitment and training, professionalization of child care, volunteers, funding, and merging services. The chapter concludes with an examination of the future directions open to us. (jas)

Friend, M., & Cook, L. (1992). Interactions: Collaboration skills for school professionals. New York: Longman.

This book deals with the interpersonal working relationships among professionals in schools. It is a guide for students and professionals to help them understand and participate effectively in their interactions with other professionals and parents in schools. This book was written for a broad audience: preservice and inservice special education, general education, and related services personnel who educate students with disabilities. The examples and activities herein focus on special service providers but are not unique to that group. What we know clearly after writing this book is that the principles for effective interaction are not dependent on roles or settings--they are universal. (p. xv)

Leathard, A. (Ed.). (1994). Going inter-professional: Working together for health and welfare. New York: Routledge.

Health and welfare professionals increasingly have to collaborate and co-ordinate their practice in order to provide an integrated service for the consumer. [This book] brings together academics, professionals, and researchers to assess the implications for all the professionals involved and the practical developments in hospitals, general practice, and community care. Individual contributors look at (a) the theoretical background to inter-professional work, (b) education and management issues, (c) inter-professional issues in work with children, people with a disability, elderly and mentally ill people, (d) the implications for carers, and (e) developments in Australia, Western Europe and the USA (author)

Ohio State University, Commission on Interprofessional Education & Practice. (1994). Interprofessional care and collaborative practice. Pacific Grove, CA: Brooks/Cole. (PsychLit Authored-Book, 94-168030-000)

Organized around a framework for perceiving, understanding, and responding, this text will help you explore the strengths and limitations of collaborative practice. [The reader will] gain valuable insight into identifying the practical and ethical issues raised in eight case studies.

[The book offers the following:] tools for interprofessional care and teamwork practice, activities designed to assist prospective teachers, clergy, social workers, physicians, nurses, psychologists, counselors, lawyers, and other human service professionals in becoming more effective interprofessional practitioners, in-depth coverage of ethical issues viewed from a variety of professional perspectives [and] examples of interprofessional process and program descriptions. (Chapter headings not listed in this annotation)(text of book jacket)

Palfrey, J. S. (1994). Community child health, An action plan for today. Westport, CT: Praeger.

This book consists of three major sections. Part I, "Where in the World are the Children?" focuses on the community. Chapters in this section explore the current world children live in. The changing community context, community influences on children's health and trends in health practices are all addressed. Part II, "Community-based Health Services," offers practical guides for child health practitioners as the practitioners move out of traditional molds and into the community. Health and schools and health and special education as well as care for children at social risk and health needs in group care programs are discussed. Implementation of community-based work is assisted by the techniques and tools found in each chapter of Part II. Part III addresses the issue of

putting children in the center of our concern, "An Action Plan for Today." Discussions include the examination of why the current system is flawed, a look at the current policy developments with a suggestion for implementing a community center, and the need for the creation of alliances among community groups to foster children's health. The book concludes with a deliberation on the three requirements needed within a community in order to support families: resources, opportunities, and facilities. (jas)

Plumridge, D. M., Bennett, R., Dinno, N., & Branson, C. (Eds.). (1993). The student with a genetic disorder. Springfield, IL: Charles C. Thomas.

This comprehensive book is intended to acquaint professionals working with children who have a genetic disorder with the typical physical characteristics, learning profiles, and health and related problems associated with the disorder. The authors address certain disorders in which intervention can have a significant impact on the child's ultimate adjustment and functioning. Educational programs can be modified to fit the individual needs of a child if adequate data is available. This informative text begins with a review of basic genetic principles and the common characteristics of a genetic syndrome. The authors provide general information appropriate to many conditions such as the elements of a barrier-free school, the role of therapists, and when to consider referral to a genetic clinic. Over 40 specific genetic disorders are described and specific medical, educational, therapy, and psychosocial issues for each are discussed. A glossary, resource directory and a list of recommended readings conclude this invaluable text. (authors)

JOURNALS

Some of the individual articles in the following journals have been annotated for this bibliography

Ducharme, E. R., & Ducharme, M. K. (Eds.). (1995, March-April) Journal of Teacher Education, 46(2).

The theme of this issue of the Journal of Teacher Education is *Interprofessional Education and Integrated Services*. "Authors in the first several articles in this issue describe conditions in schools and preparation programs calling for collaboration of schools and other agencies" (p. 84). Authors of the four thematic articles discuss the following concerns: Bullough addresses "inclusion--placing students formally taught in self-contained special education classrooms into regular education classrooms" (p. 85) and what it meant to one classroom teacher; Strawderman & Lindsey discuss school reform and the restructuring of teacher education along with a review of three prominent trends in preservice training programs for special and general education teachers; Zuniga-Hill & George note the development of integrated services for children and families using a cross-disciplinary approach beginning with changes in university curriculum; and, 4) Winitzky, Sheridan, Crow, Welch, & Kennedy, outline interdisciplinary collaboration including a description of three programs at the University of Utah consisting of a graduate course in interdisciplinary teaming, a transdiscplinary educational partnership between the university and the public schools, and a program developed for teaching preservice social workers and educators how to work together. (jas)

Gray, B., & Wood, D. J. (Eds.). (1991). Collaborative alliances: Moving from Practice to Theory, Parts I and II. The Journal of Applied Behavioral Science, 27(1 & 2).

These two special issues of the Journal of Applied Behavioral Science, present nine research-based articles and two overviews that address various theoretical and empirical perspectives on the process of collaboration and the forms of collaborative alliances. The articles examine the contributions and limits of existing theories for explaining collaboration, and seek to clarify and expand our understanding of this phenomenon. No single theoretical perspective provides an adequate foundation for a general theory of collaboration, but the articles contained in these two issues point the way to the construction of such a theory. (authors)

Klein, J.T., & Doty, W. G. (Eds.). (1994-Summer). New directions for teaching and learning, Interdisciplinary studies today (Vol. 58), San Francisco: Jossey-Bass.

"For the present volume, Julie Thompson Klein and William G. Doty have assembled chapters that map the terrain of interdisciplinary studies today. Chapter one surveys the intellectual root of interdisciplinary studies today. The remaining chapters blend theory and research with practice as they examine the design, administration, and assessment of interdisciplinary courses and programs. Chapter five relates networking to the interdisciplinary enterprise" (p. 1). Articles include Klein, J., "Finding Interdisciplinary Knowledge and Information"; Newell, W. H., "Designing Interdisciplinary Courses"; Casey, B. A., "The Administration and Governance of Interdisciplinary Programs"; Field, R., Lee, R., & Field, M. L., "Assessing Interdisciplinary Learning"; and, Bingham, N. E., "Organizational Networking: Taking the Next Step." (jas)

Koppich, J. E., & Krist, M. W. (Eds.). (1993, February). Education and Urban Society, 25(2).

This issue is devoted to the topic of integrated children's services and is titled: *Integrating services for children: Prospects and pitfalls*. Papers include Soler, M. & Shauffer, C., "Fighting Fragmentation: Coordination of Services for Children and Families"; Gardner, S. L., "Key Issues in Developing School-linked, Integrated Services"; Jehl, J. & Kirst, M., "Getting Ready to Provide School-linked Services: What Schools Must Do"; Kirst, M., "Financing School-linked Services"; Smrekar, C., "Rethinking Family-school Interactions: A Prologue to Linking Schools and Social Services"; Kahne, J. & Kelley, C., "Assessing the Coordination of Children's Services: Dilemmas Facing Program Administrators, Evaluators, and Policy Analysts"; Chaskin, R. J. & Richman, H. A., "Concerns about School-linked Services: Institution-based Versus Community-based Models"; and, Chang, H., "Serving Ethnically Diverse Communities." (jas)

REPORTS

Armstrong, B. (1992). Making government work for your city's kids: Getting through the intergovernmental maze of programs for children and families. Local official's guide. Washington, DC: National League of Cities. (ERIC Document Reproduction Service No. ED 350 373)

This guide is designed to help local elected officials become better intergovernmental advocates for their city's children and families. The book is based on the experiences of selected policy researchers, collected via a questionnaire sent to some 50 local officials. It advocates developing and using intergovernmental collaboration and partnerships in which officials from all levels and the private sector come together as equals to find joint solutions to community problems. Chapter 1, "The Dual Crises of the 1990s," provides the context within which local officials must work (children, families, and systems that are supposed to be serving them are in crisis). Chapter 2, "Who Does What To Whom," gives a brief overview of the various government structures that affect children and families and points out opportunities for advocacy in each. Chapter 3, "How the Intergovernmental Pieces Fit Together," describes the ways that intergovernmental efforts provide services to children and highlights points of flexibility where local advocacy can be particularly effective. Chapter 4, "Local Government: Catalyst for Collaboration," covers how local efforts can rationalize and coordinate the maze of services and programs and gives specific examples, resources, and sources for technical assistance. Chapter 5, "Seven Steps to Becoming a More Powerful Partner," outlines seven key steps to becoming a stronger advocate for the city's children. Included are two figures and selected supplementary discussions. Three appendixes contain lists of state advocacy organizations; national advocacy, research, and professional organizations; and 37 references. (JB)

Beckett, J. E. (1989). With a parent's eye. In R. E. K. Stein (Ed.), Caring for children with chronic illness, Issues and strategies (pp. 101-116). New York: Springer.

This chapter is concerned with the story of Katie Beckett as described by her mother. The basic problem was "leaving an essentially healthy child with severe medical complications living in a pediatric intensive care unit when her parents could care for her medical needs appropriately at home if only the government would pay for home cost care" (p. 103). The chapter goes on to explain the process followed by the parents through the halls of the federal government which eventually allowed their daughter to come home through a program now known as the "Katie Beckett waivers." The chapter concludes with discussions on the importance of support networks, home care for disabled children, community-based parent advocacy groups, home care needs and plans, and ongoing home care. (jas)

Roueche, J.E., Taber, L.S., & Roueche, S. D. (in press). The company we keep. Collaboration in American community colleges. Washington, DC: American Association of Community Colleges.

Based on the contemporary context in which community colleges operate, this book addresses the issues of collaboration and alliance building within the greater community by and through community colleges. Some of the issues discussed include the dimensions of partnerships and the variety of collaborative activities, the expansion of the definition of community, the evolving vocabulary surrounding the meaning of collaboration, the difference between the purposes of the partnerships and of collaborative activities, and the benefits of collaborations to communities and community colleges. As collaborations, alliances and partnerships evolve, five considerations are listed: (a) the purpose of the collaboration, (b) who pays for it, (c) the role played by the entities involved, (d) the type and extent of the commitment of each of the entities, and (e) learning to collaborate and be a good partner. (jas)

Shisler, L., (1990). The health/education connection: initiating dialogue on integrated services to children at risk and their families. (Report on the symposium sponsored by The American Association for Colleges of Teacher Education, The American Academy of Pediatrics, and The Maternal and Child Health Bureau, U. S. Department of Health and Human Services, Alexandria, March 5-6, 1990). Washington, DC: The Maternal and Child Health Bureau.

This report on the symposium, "The Health/Education Connection: Initiating Dialogue on Integrated Services to Children at Risk and Their Families", began with a charge to the participants to "shape a national agenda that would make coordinated, family-centered, community-based services a reality" (p. ii). Challenges included "coming to a working consensus over which children and families should be the focus of future efforts, of finding ways to expand and replicate what is already successfully being done to create integrated service delivery, of overcoming 'turf' and attitudinal obstacles, and of creating new training opportunities for professionals in each field..." (p. ii) Discussions were centered around three papers involving the following topics: (a) a changing social context: implications for service provision, (b) the current status of service provision Foundation for collaboration, and (c) the future of integrated health and education service delivery: explicating ideals and strategies for actions. The report concludes that although the participants were able meet with "like-minded" professionals and examine the current status of service delivery, there was agreement that the challenges are formidable and there is still much work to be done. (jas)

The Institute for Education Leadership. (1992, June). Leadership for collaboration: A national dialogue. Washington, DC: Author.

The Institute for Educational Leadership, as a part of its work in nurturing leaders with the skills and knowledge to work together and to share the idea that "no single institution within our society has the capacity to solve the range of problems we face," brought together over 150 people across the country to participate in a dialogue. This paper is a summary of that meeting. The report is divided into three sections: (a) leadership roles, (b) qualities and skills of collaborative leaders, and (c) Challenges for collaborative leaders. (jas)

U.S. Department of Education, Office of Educational Research and Improvement & American Educational Research Association. (1994, Fall). School-linked comprehensive services for children and families: What we know and what we need to know. Washington DC: Author. (ERIC Document Reproduction Service No. 382 580)

This document reports on a fall 1994 working conference on linking education, health, social services, and other supports that children and families need, with the school as the hub. The conference involved six working groups. Four working groups were age-related, discussing early childhood, elementary, adolescent, and youth-in-transition school-linked programs. The other two groups focused on interprofessional development and evaluation. Recommendations from the groups were largely organized around the following themes: committed leadership, cultural sensitivity and congruence, participant-driven systems, interprofessional development, new research approaches, and flexibility in policies. The document includes remarks presented by Sharon P. Robinson of the Department of Education and Jane A. Stallings of the American Educational Research Association, highlights of what is known from research and what needs to be known, a list of commissioned background papers, a list of steering committee members, and a list of conference participants. Descriptions of 22 exemplary school-linked comprehensive programs are offered, outlining who the collaborators are, the project goals, project participants, services provided, project evaluation, and what the collaborators are learning. Twelve interprofessional development programs are also described, focusing on types of interprofessional activities, how the community is served, clinical experiences offered, how schools participate, and program evaluation. (JDD)

VIDEOS

Jan Hirschfeld Productions (Producer) (1996, March). Making collaboration work for children, youth, families, schools and communities. [videotape]. Washington, DC: Office of Special Education and Rehabilitative Services, U.S. Department of Education.

The objective of this videotape, sponsored by the Office of Special Education and Rehabilitative Services, U.S. Department of Education, and co-sponsored by the Center for Mental Health Services, the Head Start Bureau, and the Children's Bureau of the U.S. Department of Health and Human Services and the Office of Juvenile Justice and Delinquency Prevention of the U.S. Department of Justice and with collaboration from the American Institute of Research, the Chesapeake Institute, and the Cosmos Corporation, was to further the goals of the National Agenda for Achieving Better Results for Children and Youth With Serious Emotional Disturbance by examining some of the collaborative efforts of programs across the country. Ages of the children addressed in this video were between 3 and 12 years.

Seven interrelated goals were addressed: (a) expand positive learning opportunities and results, (b) strengthen school and community capacity, (c) value and address diversity, (c) collaborate with families, (d) promote appropriate assessment, (e) provide ongoing skills in development and support, and (f) create comprehensive and collaborative systems. Exemplary collaborative programs already in place and which fit the goals were presented. Programs included the Westerly, RI School District; Kaleidoscope of Chicago, IL; Positive Education Programs (PEP)/Early Intervention Centers (EIC) of Cleveland, OH and BEST and FACT, two statewide initiatives in Utah. Panelists from each of these programs presented their programs with responses from remote teleconference sites and from the studio audience. The video concluded with an examination of the collaborative role that can be played by parents and professionals in their own community as well as discussion on the role of staff training through inservice and preservice education. (90 minutes) (jas)